



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023
OF THE CONDITION AND AFFAIRS OF THE

SCOTTSDALE INDEMNITY COMPANY

NAIC Group Code 0140 0140 NAIC Company Code 15580 Employer's ID Number 31-1117969

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

Incorporated/Organized 11/14/1984 Commenced Business 08/01/1985

Statutory Home Office ONE WEST NATIONWIDE BLVD., COLUMBUS, OH, US 43215-2220
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 18700 N. HAYDEN ROAD
(Street and Number)
SCOTTSDALE, AZ, US 85255 480-365-4000

ONE WEST NATIONWIDE BLVD., 114-301 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)
COLUMBUS, OH 43215-2020 (Mail Address)

(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records ONE WEST NATIONWIDE BLVD., I-14-301
(Street and Number)
COLUMBUS, OH, US 43215-2220 614-249-1545
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address WWW.NATIONWIDE.COM

Statutory Statement Contact ANDREA D. IACOBONI 614-249-1545

(Name) (Area Code) (Telephone Number)
FINRPT@NATIONWIDE.COM 866-315-1430
(E-mail Address) (FAX Number)

OFFICERS

PRESIDENT RUSSELL MARK JOHNSTON VP & TREASURER MELISSA NICOLE TOMITA #
SVP & SECRETARY DENISE LYNN SKINGLE

OTHER

PAMELA ANN BIESECKER, SVP-HEAD OF TAXATION

MARK ALLEN BERVEN OSCAR GUERRERO RUSSELL MARK JOHNSTON
DAVID NEIL NELSON ELIZABETH MARGARET RICZKO

State of OHIO County of FRANKLIN 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.

RUSSELL MARK JOHNSTON
PRESIDENT

DENISE LYNN SKINGLE
SVP & SECRETARY

MELISSA NICOLE TOMITA
VP & TREASURER

Subscribed and sworn to before me this
5 day of February FEBRUARY 2024

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



ANDREW SWARTZEL
NOTARY PUBLIC • STATE OF OHIO
Comm. No. 2021-RE-839107
My Commission Expires Oct. 24, 2026



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Alabama	DURING THE YEAR 2023							NAIC Company Code	15580			
Line of Business			Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12	
			1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees	
1. Fire	0	0	0	0	0	0	0	(430)	(8)	0	0	(74)	21	0	(2,500)
2.1 Allied Lines	12,952	10,623	0	0	5,789	0	0	(242)	4,037	0	0	(11)	372	3,562	419
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	70	89	0	0	(7)	3	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	(14,070)	(21,570)	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	718	0	0	0	0	(25)	(35)	0	0	27	28	0	248
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	(7)	(4)	0	0	(2)	1	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	57	10,216	399	9,589	12,951	0	0	0
17.2 Other Liability - Claims-Made	3,820,373	3,445,687	0	0	1,796,971	58,835	435,746	2,195,114	857,688	75,131	1,425,852	1,089,143	118,868	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	138	30,136	0	0	0	0	0	10,122	55,914	574	5,858	10,425	28	1,690	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	392	0	0	0	0	0	91	42	0	0	(529)	184	0	136
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	27	28	0	0	(1)	1	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	(4)	3	0	0	1	2	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	3,833,463	3,487,557	0	1,802,759	58,835	445,405	2,265,396	844,590	68,412	1,449,840	1,092,733	118,860			
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	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	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Alaska	DURING THE YEAR 2023								NAIC Company Code	15580	
Line of Business			Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
			1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	0	0	0	0	0	0	0	0	(2)	2	0	0	1	0
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	(671)	2	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	2,369	4,174	0	1,045	2,329	0	2,350
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	1,695	4,177	0	0	0	0	0
35. Total (a)	0	0	0	0	0	0	0	1,695	4,177	0	1,045	2,330	0	2,350
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	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	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Arizona	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	1,137,469	1,124,033	0	514,548	941,610	758,666	347,370	92,981	109,207	45,719	284,092	(2,999)	
2.1 Allied Lines	1,907,777	1,711,014	0	1,023,210	1,027,925	32,231	448,417	37,207	60,325	50,032	491,119	2	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	8,563	7,911	0	4,638	0	900	1,766	0	119	163	2,141	0	
4. Homeowners Multiple Peril	1,450,980	1,460,198	0	640,880	825,074	221,945	524,858	54,746	42,628	33,186	361,594	1	
5.1 Commercial Multiple Peril (Non-Liability Portion)	4,119,881	4,197,577	0	1,950,200	2,340,263	2,479,907	2,033,950	9,610	55,023	126,884	935,520	4	
5.2 Commercial Multiple Peril (Liability Portion)	3,512,929	3,474,301	0	1,360,168	1,649,660	834,724	3,808,344	283,728	106,068	1,126,417	796,965	3	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	182,728	156,353	0	111,907	0	(32,238)	36,344	0	(1,622)	1,586	54,647	0	
9. Inland Marine	499,124	1,219,503	0	800,233	52,000	330,851	865,150	0	11,253	38,332	133,076	(5)	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake .....	.856	.588	0	.308	0	18	50	0	(1)	2	.227	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	16,630,162	13,425,475	0	9,809,713	2,407,171	5,166,568	14,641,491	211,370	.927,295	2,999,472	3,524,944	(11)	
17.2 Other Liability - Claims-Made	11,108,088	7,430,022	0	6,792,243	1,295,000	2,126,319	4,618,207	302,703	502,586	1,200,594	2,540,851	24	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	51,426	288,290	0	64,123	82,484	260,003	2,095,947	104,748	133,453	1,691,006	16,455	0	
18.2 Products Liability - Claims-Made	277,070	296,768	0	82,661	0	0	0	0	0	0	0	85,500	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	628,814	924,272	0	236,200	1,202,510	(316,277)	1,721,930	1,638	(99,879)	178,225	117,413	(3)	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	17,994	20,027	0	1,845	(481)	5,776	(1,962)	0	(12,732)	8,373	3,650	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	4,539	3,827	0	1,969	0	(608)	.402	0	(583)	.296	1,362	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	50,541	44,457	0	26,305	0	(363)	4,279	0	.127	2,933	13,204	0	
28. Credit	8,581	14,288	0	21,893	0	(25,011)	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	4,200	105	0	4,095	0	0	0	0	0	0	1,313	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	41,601,722	35,799,011	0	23,447,141	11,823,216	11,843,412	31,146,542	1,098,731	1,833,269	7,503,221	9,364,072	(2,974)	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 15

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Arkansas	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	3,814	3,086	0	1,691	0	0	247	348	0	0	15	19	1,049
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	22	24	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine .....	.336	322	0	14	0	21	23	0	0	3	4	84	9
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	(5,866)	3,422	0	(934)	622	0	0	0
17.2 Other Liability - Claims-Made	1,051,304	871,257	0	541,028	17,138	(1,904)	351,242	0	4,599	256,581	280,742	28,928	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	(37,546)	6,417	0	(29,817)	6,175	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	56,096	59,309	0	12,487	0	6,525	33,728	0	0	12,960	23,680	13,636	6,180
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	21,201	20,571	0	4,215	7,553	12,941	5,170	0	0	783	1,004	5,300	.626
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	1,132,751	954,545	0	559,436	24,691	(25,560)	400,374	0	(12,392)	288,085	300,811	35,862	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	California	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	205,611	310,808	0	153,164	67,002	(678,554)	2,198,173	7,562	(484)	28,312	37,823	4,849	
2.1 Allied Lines	545,390	506,008	0	267,567	955,100	1,405,700	2,119,524	9,664	89,498	106,266	132,871	13,029	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	2,590	17,175	0	107	0	(12,813)	15,495	0	0	(72)	1,310	772	62
3. Farmowners Multiple Peril	358	170	0	399	9	193	185	5	4	0	0	0	8
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	2,240,591	3,071,348	0	526,102	1,389,447	2,050,651	18,246,196	25	(107,931)	134,870	626,079	52,853	
5.2 Commercial Multiple Peril (Liability Portion)	2,207,209	3,687,340	0	617,621	3,110,529	3,106,598	11,444,456	26,318	(27,968)	2,104,761	584,251	52,750	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	14,648	11,596	0	3,052	0	1,100	1,100	0	0	23	23	4,394	346
9. Inland Marine	675,800	1,168,509	0	234,924	541,135	(237,335)	115,345	8,219	63,514	67,446	134,821	24,420	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	4,687,730	6,068,501	0	987,736	16,616,352	6,171,132	29,614,351	948,551	947,779	4,257,425	1,249,764	107,668	
17.2 Other Liability - Claims-Made	22,888,823	24,286,234	0	9,813,839	4,751,722	5,878,793	15,678,683	3,541,689	4,265,275	12,815,699	6,732,346	529,682	
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	479,875	533,216	0	179,098	21,500	984,159	1,472,057	116,566	185,166	178,739	108,876	11,347	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	8,407,587	16,499,974	0	2,582,939	24,991,235	21,105,137	42,129,866	2,814,936	1,940,840	3,787,530	1,714,009	283,595	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	3,077,645	6,545,341	0	691,343	2,521,338	2,274,505	767,662	756,822	484,712	.572,949	671,243	114,359	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	4,977	6,091	0	1,635	(163)	(361)	85	0	1	11	1,254	.118	
27. Boiler and Machinery	124,812	154,544	0	42,666	33,299	30,950	2,157	0	.108	.281	31,829	2,956	
28. Credit	0	0	0	0	0	0	(4)	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	45,563,647	62,866,854	0	16,102,191	54,998,505	42,079,852	123,805,335	8,230,357	7,840,465	24,055,624	12,030,456	1,198,041	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 16,330

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Colorado	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	(454)	0	0	0	13	0	
2.1 Allied Lines	9,084	7,413	0	4,028	0	0	(1,282)	1,023	0	0	137	2,498	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	306	301	0	13	0	0	288	311	0	0	4	81	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	(892)	1,008	0	0	24,745	25,378	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	(6)	(6)	0	1	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	65,405	60,099	0	9,876	121	(309)	35,301	1,066	(3,445)	14,363	17,578	1,331	
17.2 Other Liability - Claims-Made	6,380,249	6,651,163	0	2,960,092	1,329,478	1,632,791	4,281,374	808,030	721,315	3,229,292	1,908,731	131,779	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	276	279	0	0	0	(144)	80	0	(67)	51	72	6	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	235	0	0	(407)	(51,676)	49,823	0	(6,465)	10,003	0	8	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	27,715	84,380	0	1,571	85,824	56,208	2,513	0	(1,590)	4,159	5,543	.630	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	(805)	.576	0	(322)	173	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	6,483,035	6,803,870	0	2,975,581	1,415,016	1,633,720	4,371,990	809,096	733,755	3,283,575	1,934,503	133,945	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Connecticut	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	37,701	24,176	0	16,766	0	0	3,049	4,823	0	97	294	9,991	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	5,116	3,873	0	1,552	0	0	.657	.807	0	25	44	1,356	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	26	55	0	35	70	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake .....	.672	.516	0	.194	0	0	.65	.112	0	(2)	7	178
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	97	96	0	.4	0	0	(3)	.43	0	0	22	.21	
17.2 Other Liability - Claims-Made	186,232	212,481	0	96,546	0	0	126,623	1,013,915	9,421	69,626	363,874	34,069	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	229,818	241,142	0	115,062	0	0	130,417	1,019,755	9,421	69,781	364,311	45,616	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Delaware	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	172,470	183,122	0	77,868	38,348	65,571	33,453	0	0	(1,577)	1,555	40,052	
2.1 Allied Lines	312,473	464,393	0	133,258	0	(4,663)	50,521	0	0	(2,374)	7,374	71,092	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	19,365	13,992	0	18,558	0	191	.781	0	0	9	.88	4,357	
4. Homeowners Multiple Peril	1,071,455	1,138,670	0	530,020	743,472	.935,547	289,871	50,146	37,748	12,103	241,080	.171	
5.1 Commercial Multiple Peril (Non-Liability Portion)	753,481	995,409	0	329,566	501,442	471,447	97,568	10,128	11,629	20,448	151,809	0	
5.2 Commercial Multiple Peril (Liability Portion)	894,919	972,610	0	290,195	168,266	133,993	1,046,534	118,869	74,367	340,835	179,311	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	85,116	72,444	0	36,236	0	(14,669)	13,439	0	0	(1,674)	.757	25,477	
9. Inland Marine	91,119	148,471	0	20,508	0	8,124	27,198	0	0	3,023	4,367	20,758	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	(224)	(29)	0	0	(65)	44	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	1,944,664	2,104,558	0	789,465	75,009	517,803	2,856,331	135,662	175,192	547,971	.412,349	.78	
17.2 Other Liability - Claims-Made	3,318,145	1,613,556	0	2,188,514	0	121,457	1,188,381	24,996	106,241	335,572	.923,317	12	
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	15,110	21,181	0	5,144	130,000	107,582	263,257	0	(53,873)	155,006	3,033	0	
18.2 Products Liability - Claims-Made	107,848	112,702	0	34,030	0	0	0	0	0	0	0	30,737	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	(9,419)	5,553	0	(1,477)	1,342	0	
19.4 Other Commercial Auto Liability .....	.76,113	132,293	0	55,984	101,200	(16,637)	230,078	0	(19,017)	24,318	18,655	.29
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0	6,283	5,159	2,757	0	(2,288)	1,316	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	(1)	0	0	1	2	0	
27. Boiler and Machinery .....	.6,005	15,493	0	2,574	4,385	(877)	24	0	0	5	35	1,202
28. Credit	72	17	0	56	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	8,868,355	7,988,911	0	4,511,976	1,768,405	2,320,384	6,105,714	339,801	325,869	1,453,130	2,123,228	(386)	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	District of Columbia	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	66	61	0	30	0	0	(20)	49	0	7	11	18	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	5	11	0	(3)	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	(34)	39	0	(8)	13	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	6,518	3,822	0	2,708	0	332	639	0	115	237	1,778	111	
17.2 Other Liability - Claims-Made	2,193,751	2,360,818	0	972,877	250,393	943,270	2,885,705	238,274	368,936	1,483,053	658,001	37,294	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	53,000	6,676	1	0	(1)	1	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	2,200,335	2,364,701	0	975,615	303,393	950,232	2,886,448	238,274	369,046	1,483,315	659,797	37,406	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Florida	DURING THE YEAR 2023								NAIC Company Code	15580			
Line of Business				3	4	5	6	7	8	9	10	11	12			
				1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees	
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	179,188	173,689	0	0	68,681	0	0	41,520	75,911	0	0	337	3,621	47,017	3,050	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	202	218	0	0	8	0	0	61	89	0	0	3	6	54	(5,222)	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	(51)	40	0	0	(9)	14	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	38	41	0	0	12	23	0	.504	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	71,804	95,903	0	0	6,123	0	0	.921,892	1,073,900	0	0	16,673	87,269	8,050	.2627	
17.2 Other Liability - Claims-Made	20,059,376	20,808,693	0	0	8,465,830	3,853,648	0	3,211,236	10,318,052	4,573,141	4,018,305	9,113,970	6,016,082	272,189	0	
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	1,372	1,448	0	0	.572	0	0	(716)	0	3,720	0	1	1,987	96	14	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	20,665	22,560	0	0	1,501	31,583	(20,995)	39,247	36,581	27,633	17,153	3,377	.553	0		
19.4 Other Commercial Auto Liability	267,351	299,019	0	0	73,455	.225,123	(551,609)	1,008,868	21,474	(19,958)	155,675	52,873	2,569	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	44,639	43,571	0	0	7,490	15,838	12,168	(637)	.875	(1,820)	3,562	11,243	.988	0	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	5	5	0	0	0	0	0	0	
27. Boiler and Machinery	6,526	6,532	0	0	2,447	0	0	2,558	.3,114	0	0	76	.134	1,697	.88	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	20,651,123	21,451,633	0	8,626,107	4,126,193	3,616,106	12,522,350	4,632,071	4,041,253	9,383,414	6,140,488	277,362				
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	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	0	0	0	0	0	0	

(a) Finance and service charges not included in Lines 1 to 35 \$ 40

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Georgia	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	26,665	25,806	0	13,279	0	0	4,470	7,762	0	589	1,632	7,563	1,353
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	15,979	23,019	0	9,072	0	0	(4,367)	2,745	0	(212)	647	3,196	(394)
5.2 Commercial Multiple Peril (Liability Portion)	10,460	13,966	0	5,983	0	0	(1,876)	7,503	0	(283)	1,901	3,012	496
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	91,490	203,863	0	38,640	86,625	0	35,532	(5,305)	186	32	11,654	17,966	23,566
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	41,766	23,608	0	28,039	0	0	364	8,333	0	747	3,486	8,496	2,213
17.2 Other Liability - Claims-Made	7,695,024	8,205,108	0	3,480,201	1,294,447	0	942,040	4,782,088	1,389,573	1,845,054	4,045,870	2,283,005	320,280
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	27,028	3,379	0	23,650	0	0	362	370	0	121	125	4,595	1,324
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	1,149,459	2,645,557	0	468,748	2,401,493	0	428,540	5,108,688	257,242	304,976	642,150	223,592	171,442
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	269,768	777,630	0	98,459	302,847	0	281,204	13,702	45,577	55,619	82,300	53,576	54,852
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	2,948	2,948	0	2,334	0	0	344	1,787	0	(85)	491	884	139
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	9,330,587	11,924,884	0	4,168,404	4,085,413	1,615,550	9,927,673	1,692,577	2,206,557	4,790,257	2,605,884	575,272	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 310

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Hawaii	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	0	196	0	0	0	0	(116)	183	0	9	22	0	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	41,052	41,065	0	0	0	0	5,772	16,096	0	5,320	9,287	10,674	
17.2 Other Liability - Claims-Made	38,498	40,222	0	13,405	0	0	1,081	15,054	0	353	9,997	11,549	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	427	428	0	0	0	0	89	104	0	57	64	111	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	79,977	81,911	0	13,405	0	6,826	31,437	0	5,739	19,370	22,334	3,411	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Idaho		DURING THE YEAR 2023							NAIC Company Code	15580	
Line of Business			Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
			1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	5,127	3,884	0	0	2,350	0	0	318	403	0	0	15	13	1,410
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	5	6	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	19,306	19,306	0	0	0	0	0	1,563	1,563	0	0	79	79	5,116
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	(136)	136	0	(10)	10	0	0
17.2 Other Liability - Claims-Made	1,180,398	1,425,655	0	533,570	1,161,600	731,691	660,637	177,620	252,294	602,241	349,773	23,520		
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	53,924	86,086	0	7,163	9,922	43,424	52,742	0	2,431	5,567	10,785	(3,123)		
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	12,801	16,142	0	1,857	2,150	2,108	(162)	0	120	.288	2,560	(435)		
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	1,271,556	1,551,073	0	544,939	1,173,672	778,974	715,325	177,620	254,928	608,198	369,644	20,333		
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	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	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 40

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Illinois	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	39,334	36,408	0	17,972	(556)	2,587	5,236	0	0	134	453	10,830	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	73,921	40,979	0	32,979	0	6,573	6,633	0	0	524	534	11,453	
5.2 Commercial Multiple Peril (Liability Portion)	529	860	0	331	0	(11)	40	0	0	(18)	17	159	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	7	2,327	0	0	0	(186)	(217)	0	0	119	91	2	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	(104)	(17)	0	0	(27)	20	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	41,234	43,171	0	1,256	0	(36,222)	67,663	0	0	(15,589)	23,421	10,247	
17.2 Other Liability - Claims-Made	9,530,857	10,095,486	0	4,017,701	1,430,415	1,063,703	5,405,719	.932,626	1,225,659	4,965,110	2,807,739	54,131	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	217	846	0	0	10,580	13,815	5,377	0	0	(119)	.759	.56	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	65,430	281,432	0	67,099	896,654	117,654	637,438	102,468	26,009	69,287	11,155	54,776	
21.1 Private Passenger Auto Physical Damage	0	0	0	10,503	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	14,751	16,023	0	0	0	0	0	0	0	0	0	52	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	2,805	3,789	0	1,519	0	(362)	3,634	0	0	(2,036)	1,130	.842	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	2	3	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	9,769,085	10,521,321	0	4,149,361	2,337,094	1,168,134	6,131,103	1,157,723	1,321,402	5,062,232	2,854,203	110,123	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 90

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Indiana	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	(1)	0	0	0	0	0	0	
2.1 Allied Lines	26,709	24,152	0	12,242	0	2,063	2,960	0	0	66	190	7,345	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	1,281	2,195	0	72	0	(556)	490	0	(34)	81	377	3	
5.2 Commercial Multiple Peril (Liability Portion)	1,438	1,418	0	60	0	1,021	1,212	0	(234)	319	230	21	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	54,474	106,599	0	21,014	17,006	11,816	(8,704)	0	5,478	6,327	8,565	.723	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	(101)	(18)	0	(28)	19	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	337	1,561	0	172	1,024,983	737,726	35,307	34,794	(21,521)	17,290	67	3	
17.2 Other Liability - Claims-Made	3,061,607	3,360,624	0	1,315,923	271,570	280,740	1,561,635	76,470	171,682	1,172,136	909,770	43,302	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	(1)	1	0	(1)	1	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	273,945	700,104	0	96,293	360,545	(627,544)	1,342,428	62,655	(10,537)	202,470	45,811	3,375	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	122,458	284,836	0	24,087	104,720	67,144	6,429	1,935	(15,328)	31,398	19,403	1,516	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft .....	.775	.175	0	0	139	0	75	79	0	17	18	.53
27. Boiler and Machinery	0	0	0	0	0	0	(1)	0	0	2	3	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	3,542,424	4,481,664	0	1,470,000	2,378,823	472,383	2,941,818	175,854	129,561	1,430,251	991,621	49,331	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$100

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Iowa	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	2,248	2,038	0	1,030	0	0	190	.256	0	0	15	.618	32
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	2,020	0	0	0	0	(235)	.360	0	0	123	0	22
5.2 Commercial Multiple Peril (Liability Portion)	0	115	0	0	0	0	(348)	.661	0	0	193	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	3,996	25,733	0	2,116	29,901	27,258	(5,276)	0	0	3,631	2,757	.802	31
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	1,125	1,844	0	.578	0	(1,055)	2,298	0	0	(14,976)	1,261	.225	15
17.2 Other Liability - Claims-Made	1,867,153	1,874,777	0	604,972	250,000	455,585	1,038,728	1,464,768	4,945,087	3,995,766	539,902	26,529	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	1,486,076	1,534,847	0	677,797	2,890,844	1,514,166	2,284,965	123,834	45,759	201,711	184,731	22,123	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	25,983	86,614	0	6,449	(8)	6,480	1,385	0	(13,251)	7,954	4,932	.374	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	(193)	78	0	(618)	79	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	3,386,583	3,527,987	0	1,292,942	3,170,738	2,001,848	3,323,455	1,588,601	4,965,470	4,209,859	731,210	49,126	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$175

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Kansas	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	3,742	3,327	0	0	1,671	0	0	474	351	0	156	1,029	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	233	5,625	0	0	0	0	0	144	625	0	85	42	
5.2 Commercial Multiple Peril (Liability Portion)	0	921	0	0	0	0	0	367	965	0	223	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	(295)	6,320	0	0	0	0	0	(10)	(139)	0	156	178	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	912	0	0	0	0	0	(3,120)	11,581	0	(2,274)	4,611	
17.2 Other Liability - Claims-Made	1,560,285	1,753,908	0	607,740	25,377	291,052	1,176,682	19,052	284,382	1,190,291	462,386	34,038	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	157	430	0	107	0	19	284	11	56	23	0	4	
19.4 Other Commercial Auto Liability	6,393	89,880	0	5,278	5,095	3,243	66,304	0	(304)	11,830	857	540	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	9,655	49,114	0	5,967	25,970	14,069	(497)	0	(1,268)	1,532	1,449	432	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	5	5	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	(9)	2	0	22	31	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	1,580,170	1,910,638	0	620,763	56,442	305,285	1,256,163	19,052	280,545	1,208,992	465,727	35,220	
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	0	0	0	
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Kentucky	DURING THE YEAR 2023								NAIC Company Code	15580		
				Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
				1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
Line of Business															
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	14,184	11,873	0	6,396	0	0	905	0	1,314	0	0	0	107	3,901	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	8	11	0	0	(1)	1	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	3	2	0	0	(1)	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	(2,951)	10,214	0	(1,041)	3,531	0	0	
17.2 Other Liability - Claims-Made	1,739,402	1,782,838	0	772,016	258,513	373,668	1,356,920	202,941	225,236	698,960	513,198	46,855	0	0	
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	(2)	4	0	(1)	3	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....	.904	1,019	0	.257	0	(1,675)	2,195	0	(195)	0	475	181	66	0
19.4 Other Commercial Auto Liability	67,396	66,914	0	19,966	0	(48,649)	89,578	11,031	(17,142)	0	18,588	13,499	5,536	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	36,000	34,936	0	11,408	0	.665	(635)	0	(2,897)	0	2,307	7,212	3,463	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	1,857,886	1,897,579	0	810,043	258,513	321,948	1,459,587	213,972	203,955	723,980	537,991	56,792			
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	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	0	0	0	0	0	

(a) Finance and service charges not included in Lines 1 to 35 \$ 100

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Louisiana	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	15,334	12,562	0	6,797	0	0	(18,924)	2,424	0	(1,102)	.209	4,217	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	45,793	40,069	0	5,724	0	0	2,141	2,141	0	143	143	12,135	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	3	0	0	0	0	0	1	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	1	0	0	2	0	
17.2 Other Liability - Claims-Made	478,818	474,110	0	89,729	0	0	8,865	566,165	0	(40,052)	346,158	105,433	
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	(7)	29	0	(26)	18	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	(1,996)	45	0	(184)	13	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	539,945	526,744	0	102,250	0	(9,921)	570,805	0	(41,221)	346,544	121,785	20,044	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Maine	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0			0	0	0	0	0	0	0	0	
2.1 Allied Lines	202	178			105	0	14	96	0	0	(48)	29	
2.2 Multiple Peril Crop	0	0			0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0			0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0			0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0			0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0			0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0			0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0			0	0	(3)	(1)	0	0	(1)	1	
5.2 Commercial Multiple Peril (Liability Portion)	150	150			81	0	(215)	228	0	0	(60)	81	
6. Mortgage Guaranty	0	0			0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0			0	0	0	0	0	0	0	0	
9. Inland Marine	0	0			1,114	0	(496)	(518)	0	0	206	312	
10. Financial Guaranty	0	0			0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0			0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	
12. Earthquake	0	0			0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0			0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0			0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0			0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0			0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0			0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0			0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0			0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0			0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0			0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0			0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0			0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0			0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	0			0	0	(123)	331	0	0	(49)	91	
17.2 Other Liability - Claims-Made	642,466	652,071			263,618	0	6,906	244,515	95,165	335,731	892,167	192,740	
17.3 Excess Workers Compensation	0	0			0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0			0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0			0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0			0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0			0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	475			0	0	(7,086)	7,068	0	0	(770)	1,662	
21.1 Private Passenger Auto Physical Damage	0	0			0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	294			0	0	0	284	(95)	0	(613)	386	
22. Aircraft (all perils)	0	0			0	0	0	0	0	0	0	0	
23. Fidelity	0	0			0	0	0	0	0	0	0	0	
24. Surety	0	0			0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0			0	0	(1)	0	0	0	0	0	
27. Boiler and Machinery	0	0			0	0	0	0	0	0	0	0	
28. Credit	0	0			0	0	0	0	0	0	0	0	
29. International	0	0			0	0	0	0	0	0	0	0	
30. Warranty	0	0			0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0		0	0	0	0	0	0	0	0	
35. Total (a)	642,818	654,283	0		263,804	0	(721)	251,625	95,165	334,397	894,729	192,844	
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	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0		0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Maryland	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	11,670	10,120	0	5,048	0	0	887	1,636	0	84	126	3,209	250
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	24	31	0	(2)	1	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	(794)	964	(1,170)	(1,484)	358	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	125,436	122,953	0	74,344	0	24,244	184,340	0	(1,600)	17,306	22,503	2,523	
17.2 Other Liability - Claims-Made	5,840,854	6,144,487	0	2,267,022	1,144,096	964,096	3,180,064	756,691	1,035,756	2,730,550	1,722,039	118,605	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	47	47	0	0	0	0	(29)	(31)	0	(128)	28	12	1
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	4,264	1,440	0	3,255	0	38	620	0	(37)	116	1,030	87	
19.4 Other Commercial Auto Liability	55,851	38,891	0	23,238	0	6,203	22,827	0	8,450	14,667	13,505	1,140	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	27,506	42,989	0	4,660	2,620	1,590	(495)	0	(282)	1,357	6,289	567	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	2,878	2,878	0	1,242	0	(491)	2,491	0	(743)	727	.863	.58	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	6,068,506	6,363,804	0	2,378,808	1,146,716	995,768	3,392,447	755,521	1,040,016	2,765,236	1,769,449	123,231	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 45

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Massachusetts	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0		0	0	0	0	0	0	0	0	0	(750)
2.1 Allied Lines	15,180	13,599		0	6,898	0	0	0	0	0	0	0	4,175
2.2 Multiple Peril Crop	0	0		0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0		0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0		0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0		0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0		0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0		0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0		0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0		0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0		0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0		0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0		0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0		0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0		0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0		0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0		0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0		0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0		0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0		0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0		0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0		0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0		0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0		0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0		0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0		0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0		0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0		0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0		0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	98,775	103,261		0	4,204	0	0	0	0	0	0	25,083	2,252
17.2 Other Liability - Claims-Made	124,698	105,770		0	69,600	0	0	0	0	0	0	37,416	2,649
17.3 Excess Workers Compensation	0	0		0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	2,291	12,314		0	81	0	0	0	0	0	0	0	518
18.2 Products Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0		0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0		0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0		0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0		0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0		0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0		0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0		0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0		0	0	0	0	0	0	0	0	0	0
24. Surety	0	0		0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0		0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0		0	0	0	0	0	0	0	0	0	0
28. Credit	0	0		0	0	0	0	0	0	0	0	0	0
29. International	0	0		0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0		0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	240,944	234,943	0	80,783	0	0	0	0	0	0	0	67,191	4,549
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Michigan	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	(266)	(9)	0	0	(59)	4	0
2.1 Allied Lines	30,259	25,847	0	13,869	0	0	2,157	4,211	0	0	(5)	184	8,321
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	2,592	3,216	0	0	(79)	40	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	(916)	3,428	0	0	(1,298)	922	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	(1,908)	675	0	0	0	0	117	(530)	0	0	700	968	(133)
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	2,113	0	0	0	0	(2,494)	5,848	0	0	(633)	1,811	0
17.2 Other Liability - Claims-Made	5,113,906	5,365,468	0	2,156,786	171,494	(20,771)	2,471,481	606,779	1,543,556	3,048,085	1,518,982	71,516	0
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	(753)	0	0	0	(570)	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	3,772	4,243	0	0	0	0	(18,362)	12,175	0	0	(1,207)	2,530	324
19.4 Other Commercial Auto Liability	(5,924)	6,013	0	1,454	5,500	(72,150)	95,513	0	0	(10,006)	21,933	500	(526)
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	(7,961)	(7,590)	0	135	8,063	(2,134)	(523)	0	0	(5,782)	3,809	(1,332)	(102)
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	2,750	2,750	0	1,490	0	282	1,685	0	0	(445)	495	825	38
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	5,134,894	5,399,519	0	2,173,734	185,057	(112,697)	2,596,495	606,779	1,524,171	3,080,782	1,527,963	71,621	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Minnesota	DURING THE YEAR 2023								NAIC Company Code	15580		
Line of Business				3	4	5	6	7	8	9	10	11	12		
				1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	(87)	(2)	0	0	0	2	0
2.1 Allied Lines	8,326	7,483	0	0	3,714	0	0	0	561	1,363	0	0	0	202	2,301
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	132	133	0	0	5	0	0	0	180	198	0	0	0	2	35
5.2 Commercial Multiple Peril (Liability Portion)	471	577	0	0	114	0	0	0	(26)	29	0	0	0	14	9
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	486	0	0	0	0	0	(95)	(359)	0	0	0	257	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	71,144	11,514	0	0	59,957	0	0	1,148	1,441	0	11	0	119	17,446	1,455
17.2 Other Liability - Claims-Made	7,135,145	7,685,075	0	0	2,966,527	1,417,351	2,103,597	5,067,966	904,312	914,517	0	2,813,969	0	2,140,292	142,730
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	(3)	2	0	0	(1)	1	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	310	345	0	0	194	0	0	(1,337)	2,179	0	0	(101)	471	81	6
19.4 Other Commercial Auto Liability	12,242	53,955	0	0	7,651	54,860	(79,141)	56,828	36,178	0	0	18,502	2,987	3,183	243
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	1,476	3,105	0	0	923	3,215	3,772	293	0	0	0	(1,300)	840	384	30
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	(1,640)	1,040	0	(1,759)	420	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	7,229,246	7,762,673	0	3,039,086	1,475,426	2,026,929	5,130,977	940,489	929,952	0	2,819,285	2,163,863	144,642		
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	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	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Mississippi	DURING THE YEAR 2023							NAIC Company Code	15580	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	7,167	5,321	0	3,081	0	0	289	582	0	25	38	1,971	170
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	22	24	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	1,060,386	1,023,154	0	410,390	480,000	338,410	647,860	153,590	136,229	360,268	315,201	13,035	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	4,000	4,000	0	500	0	715	2,351	0	(318)	660	1,200	43	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	1,071,553	1,032,475	0	413,972	480,000	339,436	650,817	153,590	135,936	360,965	318,372	13,248	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Missouri	DURING THE YEAR 2023								NAIC Company Code	15580	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12	
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees	
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	14,594	13,375	0	6,689	0	0	858	1,954	0	64	147	4,013	292	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	663	0	0	0	0	420	523	0	(6)	13	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	191	0	0	5,000	722,485	750,596	8,622	17,501	81,232	0	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	3,878	7,058	0	828	0	0	(361)	(624)	0	514	501	776	78	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	(6)	3	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	8,034	8,351	0	1,063	13,000	(49,426)	10,279	11	(13,158)	4,228	2,127	.161		
17.2 Other Liability - Claims-Made	3,697,882	3,824,507	0	1,372,019	48,490	381,228	2,203,120	334,535	186,995	1,435,080	1,091,614	73,958		
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	60,162	114,702	0	21,135	0	(7,653)	133,979	0	0	3,056	25,309	11,996	1,206	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	49,622	96,151	0	14,373	10,668	12,144	(1,466)	0	(2,684)	4,277	9,907	993		
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	1	1	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	3,834,172	4,064,998	0	1,416,107	77,158	1,059,680	3,098,360	343,167	192,273	1,550,792	1,120,433	76,687		
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	0	0	0	0	
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	

(a) Finance and service charges not included in Lines 1 to 35 \$ 165

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Montana	DURING THE YEAR 2023							NAIC Company Code	15580	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	2,558	2,300	0	1,172	0	0	214	356	0	0	41	.707	.86
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	25	25	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	400	244	0	225	0	0	(99)	166	0	0	49	.83	.28
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	(120)	384	0	(36)	126	0	0
17.2 Other Liability - Claims-Made	1,003,159	1,041,185	0	380,397	111,620	118,574	.536,227	.392,640	382,691	731,795	.298,642	33,334	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	(4)	5	0	(4)	(1)	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	1,006,117	1,043,729	0	381,795	111,620	118,589	537,164	392,640	382,597	732,010	299,432	33,448	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Nebraska	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	0	0	0	0	0	0	(21)	0	0	0	(6)	3	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	2,885	2,885	0	0	0	0	243	244	0	20	21	.577	
5.2 Commercial Multiple Peril (Liability Portion) .....	.375	.375	0	0	0	0	143	143	0	32	32	.75
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	145	0	0	0	472	(122)	0	34	337	1	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	0	0	0	0	0	(3,756)	14,511	0	(1,419)	4,217	0	
17.2 Other Liability - Claims-Made	964,030	1,090,461	0	359,813	40,000	85,713	671,395	92,856	111,624	443,835	288,604	13,553	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	(2)	5	0	0	(1)	3	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	12,003	12,321	0	15	0	(91,415)	85,164	0	(10,614)	23,569	2,401	.203	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	11,384	12,158	0	66	0	2,440	2,467	0	(2,135)	1,297	2,277	.229	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	990,677	1,118,346	0	359,894	40,000	(6,183)	773,806	92,856	97,535	473,314	293,934	14,037	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 90

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Nevada	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	21,031	19,705	0	9,736	0	0	1,182	4,632	0	0	(366)	.765	5,857
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	886	0	0	0	0	(79)	78	0	0	(32)	24	0
5.2 Commercial Multiple Peril (Liability Portion)	2,945	4,643	0	1,598	0	0	123	1,501	0	0	2	.281	.884
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	69	(35)	0	0	0	134	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	163	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	48	0	0	0	0	(6,446)	7,701	0	0	(1,472)	1,874	0
17.2 Other Liability - Claims-Made	4,187,651	4,797,617	0	1,354,867	1,465,100	1,292,692	2,320,703	1,016,758	117,275	2,714,724	1,253,467	154,550	0
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	2	0	0	0	0	(15)	9	0	0	(4)	7	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	382,168	469,767	0	67,400	179,071	267,654	453,403	16,325	6,104	52,411	69,958	14,716	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	97,042	110,598	0	16,479	65,030	53,712	(1,372)	0	20,066	24,622	17,632	3,822	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	(703)	247	0	0	(626)	105	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	4,690,837	5,403,266	0	1,450,080	1,709,201	1,608,190	2,786,888	1,033,083	141,081	2,794,975	1,347,797	173,941	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 50

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF New Hampshire		DURING THE YEAR 2023							NAIC Company Code	15580	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	29
2.1 Allied Lines	404	350	0	0	185	0	0	0	0	0	0	0	111
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	48
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	790
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	404	350	0	185	0	0	0	0	0	0	0	111	867
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	New Jersey	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	14,796	12,498	0	5,959	0	0	0	0	0	0	0	0	4,016
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	106	106	0	19	0	0	0	0	0	0	0	0	28
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	9,334	13,477	0	1,167	0	0	0	0	0	0	0	0	2,474
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	97	85	0	24	0	0	0	0	0	0	0	0	26
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	88,637	65,809	0	22,860	0	(1,928,290)	891,396	0	0	0	0	19,893	1,861
17.2 Other Liability - Claims-Made	104,605	105,234	0	2,227	0	0	0	0	0	0	0	31,360	2,115
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	1	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	2	2	0	0	0	0	0	0	0	0	0	0	1
19.4 Other Commercial Auto Liability	474	474	0	0	0	0	0	0	0	0	0	0	123
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	136	136	0	0	0	0	0	0	0	0	0	0	35
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	218,187	197,821	0	32,256	0	(1,928,290)	891,396	0	0	0	0	57,955	5,232
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	New Mexico	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	(10)	0	0	(2)	0	0	
2.1 Allied Lines	0	0	0	0	0	0	(46)	(2)	0	0	(11)	5	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	(3)	12	0	0	(4)	3	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	(120)	151	0	0	(51)	62	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	0	0	0	0	0	(2,333)	14,601	0	(1,802)	3,367	0	
17.2 Other Liability - Claims-Made	1,059,115	1,142,549	0	539,386	938,392	660,453	746,771	158,066	122,470	483,211	317,735	35,844	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	3,684	0	0	0	0	(10,240)	16,666	0	(1,427)	1,833	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	2,769	0	0	0	0	0	325	(118)	0	(512)	488	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	1,059,115	1,149,002	0	539,386	938,392	648,021	778,080	158,066	118,652	488,972	317,735	35,844	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	New York	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	4,610	4,646	0	1,206	.307	1,026	.926	.84	.105	.61	1,281	.104	
2.1 Allied Lines	254,824	244,441	0	81,903	.435,114	511,778	130,065	7,327	17,531	11,921	67,289	5,865	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	14,511	14,854	0	4,411	0	2,121	.2,895	0	.56	.164	3,795	.349	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	29,413	42,822	0	21,042	100,000	112,269	16,669	3,462	3,571	.975	6,357	1,473	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	94,310	127,881	4,253	(771)	8,432	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	3,314,640	3,296,172	0	1,193,298	.367,788	669,272	.333,890	7,422	31,810	34,836	901,346	75,991	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	39,370	38,965	0	18,616	0	7,419	.9,269	0	.207	.506	10,405	.930	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	874,422	331,018	0	.599,125	.21,946,280	.9,445,798	.81,373,953	.1,356,206	.87,102	.3,610,338	160,121	143,218	
17.2 Other Liability - Claims-Made	316,522	423,243	0	182,260	.607,500	(3,264,547)	.1,829,657	.548,255	.228,201	.2,051,571	74,563	.6,978	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	4,514	4,125	0	.549	(6,398)	(119,799)	.113,597	.5,225	(21,845)	.113,643	.678	.112	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	2	4	0	0	.135	(287)	.199	2	(99)	(2)	0	0	
19.4 Other Commercial Auto Liability	17	79	0	0	.618	(10,987)	.23,936	(1)	.780	.5,816	2	11	
21.1 Private Passenger Auto Physical Damage	0	0	22	0	0	0	(1,561)	.109	0	(236)	.126	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	1	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	57,010	.58,092	0	21,032	0	82	.1,009	.8,776	.8,789	35	15,108	.1,317	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	4,909,855	4,458,482	0	2,129,443	23,451,342	7,446,894	83,964,055	1,941,010	355,200	5,838,422	1,240,945	236,350	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	North Carolina	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	15,907	14,345	0	7,285	0	0	1,117	2,020	0	86	131	4,374	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	39	44	0	(3)	2	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	(2)	8	0	(7)	4	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	(11)	(15)	0	0	11	4	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	55,928	38,647	0	23,163	0	237,859	305,026	16,163	26,945	36,058	3,915	1,202	
17.2 Other Liability - Claims-Made	4,877,485	4,993,245	0	2,066,647	505,167	447,527	2,376,338	123,650	257,158	1,804,639	1,452,710	91,168	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	79,391	62,299	0	23,895	0	4,518	32,053	0	4,006	15,027	5,557	1,645	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	(35,654)	30,185	0	(3,617)	7,257	(56)	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	3,358	15,883	0	477	66,428	67,014	(377)	1,387	1,268	1,471	.672	1,931	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	4,999	3,782	0	2,708	0	419	1,725	0	(26)	484	1,500	.104	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	5,037,068	5,128,201	0	2,124,175	571,595	722,824	2,747,009	141,200	285,821	1,865,077	1,468,728	96,309	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	North Dakota	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines .....	.215	.284	0	.99	0	0	8	.61	0	0	2	.5	.19
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	4	4	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	(5)	6	0	0	2	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	(2)	(3)	0	1	1	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	730,904	728,068	0	268,054	57,500	88,884	383,561	33,809	(6,943)	210,008	219,271	12,790	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	(29)	9	0	0	(4)	3	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	(1,181)	.371	0	0	(138)	.134	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	2	3	0	0	(39)	12
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	731,119	728,352	0	268,153	57,500	87,681	384,011	33,809	(7,122)	210,165	219,330	12,809	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Ohio	DURING THE YEAR 2023								NAIC Company Code	15580		
				Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
				1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
Line of Business															
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	29,635	26,924	0	0	13,505	0	0	2,594	3,640	0	0	93	288	8,155	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	72	56	0	0	16	0	0	12	12	0	0	1	1	19	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	(290)	1,831	0	0	0	0	0	25	234	0	0	1	35	(58)	
5.2 Commercial Multiple Peril (Liability Portion)	475	974	0	0	201	0	0	(4,160)	527	0	0	(22)	139	133	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	16,451	17,215	0	0	4,336	0	0	(164)	(462)	0	0	571	772	3,290	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	72	56	0	0	16	0	0	10	10	0	0	0	0	1	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	16,302	24,842	0	0	11,227	0	0	230,258	358,020	2,356	144,566	182,981	4,084	.216	
17.2 Other Liability - Claims-Made	5,701,135	6,161,234	0	0	2,367,352	1,399,787	0	2,345,236	4,103,168	716,583	1,392,112	2,814,215	1,684,939	79,495	
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	53	32	0	0	(38)	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	73,174	119,818	0	0	18,234	13,559	0	(50,701)	141,639	0	0	(5,670)	26,295	14,584	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	29,834	41,740	0	0	7,187	0	0	892	0	0	(1,361)	2,159	5,967	.322	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	1,000	979	0	0	458	0	0	367	377	0	0	84	97	.300	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	5,867,860	6,395,670	0	2,422,533	1,413,345	0	2,524,422	4,606,440	718,939	1,530,335	3,026,983	1,721,431	82,490		
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	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	0	0	0	0	0	

(a) Finance and service charges not included in Lines 1 to 35 \$ 45

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Oklahoma	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	10,234	8,078	0	4,511	0	0	0	0	0	0	0	0	2,814,.409
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	83	89	0	3	0	0	0	0	0	0	0	0	22.10
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	(14,779)	(13,630)	0	0	0	0	0	0	0	0	0	0	75
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	1,008	42	0	.966	0	0	0	0	21	21	0	151	23
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage .....	.328	14	0	.314	0	0	0	0	0	0	0	0	49.7
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	(3,126)	(5,407)	0	5,794	0	0	0	0	21	21	0	(658)	582
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Oregon	DURING THE YEAR 2023							NAIC Company Code	15580		
Line of Business			Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
			1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	(1,084)	0	0	0	0	0
2.1 Allied Lines	10,588	8,890	0	0	4,707	0	0	0	446	1,316	0	0	147	2,922
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	52	57	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	424	486	0	0	119	0	0	0	0	0	0	0	0	127
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	(4)	(4)	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	(937)	315	0	(51)	35	0
17.2 Other Liability - Claims-Made	3,183,148	3,361,769	0	0	1,403,555	955,000	1,621,511	2,285,281	622,922	559,664	1,984,821	.952,628	43,931	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	(1,105)	1,206	0	.251	1,840	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	2,106	3,546	0	0	.563	0	15,967	16,353	0	179	.243	.417	25	0
19.4 Other Commercial Auto Liability	199,233	295,717	0	0	54,357	48,184	11,834	172,160	0	11,060	41,876	39,115	2,456	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	14,719	21,708	0	0	3,940	14,066	9,349	4,686	0	(283)	.717	2,878	183	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	(8)	18	0	(40)	14	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	3,410,218	3,692,117	0	1,467,241	1,017,249	1,656,021	2,481,350	622,922	570,501	2,029,710	998,087	46,748		
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	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	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Pennsylvania	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	32,797	28,007	0	14,859	0	0	2,396	3,325	0	120	186	9,019	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	58	65	0	(2)	1	0	
5.2 Commercial Multiple Peril (Liability Portion)	263	216	0	47	0	0	(23)	17	0	(8)	12	66	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	186	186	0	23	0	0	(22)	(42)	0	48	38	49	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	20	20	0	3	0	0	3	4	0	0	5	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	92,054	83,205	0	14,697	3,494	12,496	38,089	0	7,884	18,484	18,264	1,852	
17.2 Other Liability - Claims-Made	9,269,455	9,482,289	0	3,659,059	1,213,578	420,246	5,469,906	834,327	1,649,610	4,569,012	2,720,118	189,952	
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	128,118	136,381	0	5,335	7,118	30,352	91,100	1,230	122,049	146,303	8,985	2,562	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	136	110	0	85	0	(1,024)	508	0	(88)	85	35		
19.4 Other Commercial Auto Liability	1,695	2,918	0	1,059	0	(17,413)	9,245	0	(1,463)	1,712	.441		
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	804	829	0	503	0	0	288	254	0	(295)	148	209	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	4,563	0	0	0	0	(147)	4,554	0	(1,436)	1,288	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	9,525,528	9,738,723	0	3,695,669	1,224,190	447,210	5,617,026	835,557	1,776,420	4,737,269	2,757,191	195,219	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Rhode Island	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	0.1	1	0	0	0	0	(12)	9	0	1	0	0	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	(26)	3	0	(12)	7	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	(43)	29	2,344	2,338	10	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	0	0	0	0	0	(4)	7	0	(2)	2	0	
17.2 Other Liability - Claims-Made	883,451	903,547	0	372,175	0	0	55,745	493,752	95,480	107,513	353,152	263,725	18,033
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	12,189	39,793	0	5,919	0	0	2,846	24,884	0	584	4,437	2,438	243
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	2,022	19,831	0	0	0	0	98	0	(313)	0	(12)	.631	404
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	897,663	963,171	0	378,094	0	0	58,603	518,372	97,824	110,409	358,240	266,568	18,316
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	South Carolina	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	8,191	7,205	0	3,754	0	0	631	962	0	0	47	62	2,253
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	94	64	0	0	(11)	9	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	2,018	0	0	0	0	(152)	(293)	0	0	116	216	(26)
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	2,629	3,255	0	190	0	910	1,381	0	0	359	612	648	.81
17.2 Other Liability - Claims-Made	2,203,353	2,186,601	0	862,483	6,120	350,244	1,352,682	55,917	281,247	961,120	654,117	66,554	0
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	9,286	9,286	0	0	0	0	3,357	3,357	0	0	1,174	1,174	2,043
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	153	153	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	148,277	182,236	0	14,827	200,160	26,861	1,289,835	40,762	127,387	159,972	28,680	3,622	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	97,080	107,647	0	10,001	67,750	111,298	73,725	0	0	(3,952)	6,094	18,951	2,487
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	2,469,769	2,498,401	0	891,256	274,030	493,251	2,721,721	96,679	406,368	1,129,259	706,691	73,213	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 50

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	South Dakota	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	0	76	0	0	0	0	(57)	61	0	0	2	7	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	1	2	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	0	0	0	0	0	(1,365)	5,205	0	(453)	1,890	0	
17.2 Other Liability - Claims-Made	495,743	484,909	0	209,753	70,000	84,518	235,838	16,171	30,297	198,385	147,462	13,266	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	38	235	0	(226)	33	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	(16)	(1)	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	495,743	484,986	0	209,753	70,000	83,138	241,345	16,171	29,603	200,314	147,462	13,266	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Tennessee	DURING THE YEAR 2023							NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	0	0	0	0	0	10	161	0	8	43	0	0
2.1 Allied Lines	15,715	13,919	0	7,141	0	1,106	2,066	0	31	191	4,322	421
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	12	26	0	(4)	3	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	(37)	(8)	0	(10)	7	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	13	0	0	0	(2,358)	4,209	0	(1,426)	3,066	0	0
17.2 Other Liability - Claims-Made	5,093,447	5,006,440	0	2,082,776	206,130	642,500	2,779,364	353,897	363,291	2,172,115	1,517,867	134,134
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	(4)	2	0	(1)	2	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	8,434	128,167	0	3,680	155,682	9,772	279,958	15,885	(11,269)	24,214	2,003	56
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	16,687	44,386	0	3,820	17,832	18,413	(646)	0	(593)	1,727	3,670	470
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	7,772	4,287	0	3,620	0	511	2,017	0	(324)	581	2,152	191
27. Boiler and Machinery	0	0	0	0	0	0	0	0	2	2	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	5,141,455	5,197,212	0	2,101,037	379,645	669,924	3,067,151	369,782	349,705	2,201,951	1,530,012	135,272
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	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 15

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF Texas		DURING THE YEAR 2023								NAIC Company Code	15580	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12	
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees	
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	(750)	
2.1 Allied Lines	139,889	133,744	0	60,417	0	0	(19,896)	44,016	0	0	464	4,051	38,469	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	1,376	1,354	0	57	0	0	470	541	0	1	13	365	22	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	(454)	692	0	0	(243)	270	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	5,152	0	0	0	0	(3,993)	(4,537)	0	0	1,134	967	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	1,921	43,982	85,841	21	1,096	2,468	0	0	
17.1 Other Liability - Occurrence	62,806	186,421	0	34,771	0	104,008	335,059	10,800	40,194	66,954	13,514	1,001		
17.2 Other Liability - Claims-Made	17,901,890	19,032,815	0	7,517,502	1,621,776	11,375,202	23,275,320	3,177,851	4,261,505	11,495,259	5,110,222	286,235		
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	30,479	32,528	0	24,216	0	7,675	14,742	0	0	3,630	6,343	5,169	.487	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	3,195	8,354	0	475	4,947	1,710	6,845	0	0	(9)	1,254	630	.114	
19.4 Other Commercial Auto Liability	801,022	1,618,094	0	210,729	690,669	1,294,498	1,870,749	47,225	40,428	218,466	149,045	95,861		
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	249,213	311,792	0	76,548	117,459	69,046	138,295	0	0	(3,801)	9,844	46,040	.6,843	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	3,975	3,975	0	166	(14,740)	(16,382)	3,584	0	0	(1,352)	1,054	1,193	.64	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	19,193,845	21,334,230	0	7,924,881	2,422,031	12,855,866	25,771,147	3,235,897	4,343,047	11,806,944	5,364,646	391,550		
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	0	0	0	0	
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Utah	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	4,365	4,053	0	2,001	0	0	248	619	0	25	46	1,200	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	23	41	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	(8,342)	6,857	0	(1,175)	2,336	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	(5)	7	0	0	1	0	
9. Inland Marine	0	0	0	0	0	0	10	(4)	0	11	16	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	104,904	103,863	0	74,307	0	11,255	52,090	0	8,350	23,854	23,079	2,361	
17.2 Other Liability - Claims-Made	3,351,794	3,622,743	0	1,457,800	1,501,628	1,261,885	2,025,662	364,858	333,268	1,369,992	999,191	76,200	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	2,002	4,274	0	260	0	(236)	2,850	0	(27)	516	400	76	
19.4 Other Commercial Auto Liability	85,252	171,941	0	8,671	17,978	(10,959)	171,518	4,124	8,713	42,457	17,050	3,215	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	25,567	40,325	0	1,314	3,814	4,705	(617)	0	(2,373)	2,025	5,113	1,208	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	2,551	2,551	0	2,232	0	(204)	1,741	0	(997)	559	765	57	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	3,576,435	3,949,750	0	1,546,586	1,523,420	1,258,379	2,260,763	368,982	345,785	1,441,805	1,046,799	83,217	
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	0	0	0	
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	

(a) Finance and service charges not included in Lines 1 to 35 \$ 50

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Vermont	DURING THE YEAR 2023								NAIC Company Code	15580		
				Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
				1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
Line of Business															
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	220	194	0	0	101	0	0	4	59	0	0	6	9	61	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	(170)	74	0	(81)	64	0	
17.2 Other Liability - Claims-Made	20,695	36,053	0	0	12,189	0	0	(514)	40,050	0	(1,209)	26,219	6,209	414	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	(284)	121	0	(25)	30	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	2	3	0	(13)	0	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	20,915	36,248	0	12,290	0	(961)	40,308	0	(1,321)	26,322	6,269	418			
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	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	0	0	0	0	0	

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Virginia	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire .....	.2	.6	.0	.9	.3	.3	.5	.0	.0	.0	.1	.1	.0
2.1 Allied Lines	11,859	10,962	.0	5,379	.2	.915	1,485	.0	.0	.63	.85	.3,261	.267
2.2 Multiple Peril Crop .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.3 Federal Flood .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.4 Private Crop .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.5 Private Flood .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. Farmersowners Multiple Peril .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners Multiple Peril .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial Multiple Peril (Non-Liability Portion)	149,721	4,404	.0	145,317	.0	.720	.720	.0	.59	.60	.22	.37,430	.3,369
5.2 Commercial Multiple Peril (Liability Portion) .....	.0	.0	.0	.0	.0	.0	117	.94	.0	.0	.0	.0	.0
6. Mortgage Guaranty .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8. Ocean Marine .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9. Inland Marine .....	.562	.562	.0	.0	.0	.0	.0	(4)	(3)	.0	.13	.14	.29
10. Financial Guaranty .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11.1 Medical Professional Liability - Occurrence .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11.2 Medical Professional Liability - Claims-Made .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12. Earthquake .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
13.1 Comprehensive (hospital and medical) ind (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
13.2 Comprehensive (hospital and medical) group (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit A&H (Group and Individual) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Vision Only (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Dental Only (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Disability Income (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.4 Medicare Supplement (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.5 Medicaid Title XIX (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.6 Medicare Title XVIII (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.7 Long-Term Care (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.8 Federal Employees Health Benefits Plan (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.9 Other Health (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
16. Workers' Compensation .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - Occurrence .....	.0	3	.0	(1)	.0	(7,753)	10,409	.0	(2,013)	.3,879	.0	.0	.0
17.2 Other Liability - Claims-Made	369,664	630,590	.0	202,953	138,119	147,192	1,666,626	18,971	(1,585,551)	49,117	73,460	.10,293	.0
17.3 Excess Workers Compensation .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.1 Products Liability - Occurrence .....	.0	.0	.0	.0	.0	.0	(2)	.5	.0	(2)	.4	.0	.0
18.2 Products Liability - Claims-Made .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other Private Passenger Auto Liability	11	11	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other Commercial Auto Liability	6,740	18,101	.0	4,213	.0	1,062	15,916	.0	.308	2,603	.1,348	.151	.0
21.1 Private Passenger Auto Physical Damage .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial Auto Physical Damage	2,486	9,308	.0	.414	.0	.34	(117)	.0	(41)	.300	.497	.1,057	.0
22. Aircraft (all perils) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
23. Fidelity .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
24. Surety .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
26. Burglary and Theft .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
27. Boiler and Machinery .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
28. Credit .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
29. International .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
30. Warranty .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. Total (a)	541,045	673,947	0	358,284	138,124	142,282	1,695,141	18,971	(1,587,217)	426,085	116,165	15,167	.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	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Washington	DURING THE YEAR 2023							NAIC Company Code	15580		
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12	
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees	
1. Fire	0	0	0	0	0	0	0	(291)	0	0	0	7	0	
2.1 Allied Lines	14,094	11,860	0	6,294	0	0	0	842	1,919	0	0	270	3,907	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	505	505	0	0	0	0	0	465	490	0	10	17	114	
5.2 Commercial Multiple Peril (Liability Portion)	1,036	1,076	0	328	0	0	(470)	270	0	0	(42)	41	311	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	900	798	0	113	0	0	(1,092)	1,479	0	0	(181)	388	252	
17.2 Other Liability - Claims-Made	7,707,565	8,315,260	0	3,250,717	4,374,339	2,213,603	5,177,256	2,416,642	3,195,119	5,233,443	2,312,270	163,439	0	0
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	(2)	1	0	0	(1)	1	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	43,295	96,242	0	9,238	6,519	48,140	100,878	0	0	1,121	11,313	6,941	2,129	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	15,566	33,112	0	9,448	1,036	1,369	185	0	0	(139)	1,171	3,719	315	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	418	0	0	0	0	(492)	1,277	0	0	(1,083)	415	0	
27. Boiler and Machinery	77	77	0	0	0	0	0	3	3	0	0	0	17	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	7,783,038	8,459,349	0	3,276,139	4,381,893	2,262,077	5,283,759	2,416,642	3,194,649	5,247,066	2,327,530	166,215	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	0	0	0	0	
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	West Virginia	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	5,360	4,312	0	2,376	0	0	215	424	0	0	52	1,474	219
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	2,403	0	0	0	0	78	229	0	9	29	0	(1)
5.2 Commercial Multiple Peril (Liability Portion)	0	297	0	0	0	0	(4)	233	0	(2)	81	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	2,041	0	0	0	0	(16)	(240)	0	206	278	0	(1)
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	47	0	0	0	0	(4,249)	14,119	0	(1,627)	4,619	0	0
17.2 Other Liability - Claims-Made	39,398	97,609	0	15,515	70,000	112,265	85,027	23,769	16,099	31,397	11,085	2,647	
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	157,775	191,206	0	5,939	28,167	43,661	172,143	24,319	29,819	30,436	27,768	6,494	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	198,907	207,035	0	7,866	682,820	849,124	161,962	1,558	(7,463)	6,438	35,282	8,179	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	1	1	0	0
27. Boiler and Machinery	0	0	0	0	0	0	(1)	0	0	1	1	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	401,440	504,949	0	31,696	780,987	1,000,972	433,957	49,646	37,017	73,332	75,608	17,538	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Wisconsin	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0			0	0	0	0	0	0	0	0	
2.1 Allied Lines	208	208			0	0	57	74	0	0	7	57	
2.2 Multiple Peril Crop	0	0			0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0			0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0			0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0			0	0	0	0	0	0	0	0	
3. Farmowners Multiple Peril	0	0			0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0			0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0			0	0	57	61	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0			0	0	5	13	0	0	2	0	
6. Mortgage Guaranty	0	0			0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0			0	0	0	0	0	0	0	0	
9. Inland Marine	0	0			0	0	(55)	(110)	0	0	47	0	
10. Financial Guaranty	0	0			0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0			0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	
12. Earthquake	0	0			0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0			0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0			0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0			0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0			0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0			0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0			0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0			0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0			0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0			0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0			0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0			0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0			0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	0			0	0	(830)	3,011	0	0	(366)	1,283	
17.2 Other Liability - Claims-Made	0	1,196			0	0	(171,935)	344,672	160	(50,080)	193,685	600	
17.3 Excess Workers' Compensation	0	0			0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0			0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0			0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0			0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0			0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0			0	0	(3,679)	1,104	0	0	(221)	275	
21.1 Private Passenger Auto Physical Damage	0	0			0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0			0	0	0	0	5	0	(28)	3	
22. Aircraft (all perils)	0	0			0	0	0	0	0	0	0	0	
23. Fidelity	0	0			0	0	0	0	0	0	0	0	
24. Surety	0	0			0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0			0	0	(19)	3	0	0	(38)	11	
27. Boiler and Machinery	0	0			0	0	0	0	0	0	0	0	
28. Credit	0	0			0	0	0	0	0	0	0	0	
29. International	0	0			0	0	0	0	0	0	0	0	
30. Warranty	0	0			0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	208	1,404	0	0	0	0	(176,400)	348,833	160	(50,661)	195,314	57	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Wyoming	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	487	542	0	223	0	0	(155)	8	0	0	51	134	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	(26)	(17)	0	0	7	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	(3)	(1)	0	0	1	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	28,225	27,301	0	19,993	0	1,565	15,337	0	1,905	0	7,091	6,210	
17.2 Other Liability - Claims-Made	117,654	174,670	0	72,304	0	32,126	69,689	0	37,091	0	103,455	32,203	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	0	7,294	5,102	0	3,010	0	(453)	77	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	(201)	112	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	1	1	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a)	146,366	202,514	0	92,520	7,294	38,579	88,035	0	38,275	0	10,795	38,546	
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Guam	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business			Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10	11	12
			1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	.550
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	.250
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	0	0	0	0	0	0	0	0	0	0	0	0	800
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Puerto Rico	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	5,491	6,476	0	0	0	0	0	0	0	0	0	1,428	.259
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	5,491	6,476	0	0	0	0	0	0	0	0	0	1,428	259
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF U.S. Virgin Islands		DURING THE YEAR 2023							NAIC Company Code	15580	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	200
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	0	0	0	0	0	0	0	0	0	0	0	0	200
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Canada	DURING THE YEAR 2023								NAIC Company Code	15580		
				Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
				1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
Line of Business															
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.1 Allied Lines	0	0	0	0	0	0	0	0	0	6	0	0	0	0	
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3. Farmersowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	0	0	0	0	1	0	0	0	0	
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	284,137	2,264,569	0	238,136	665,116	0	
17.3 Excess Workers Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	284,138	2,264,576	0	238,136	665,116	0	
35. Total (a)	0	0	0	0	0	0	0	0	284,138	2,264,576	0	238,136	665,116	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	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	0	0	0	0	0	

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Other Aliens	DURING THE YEAR 2023								NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines	388,947	368,782	0	0	145,855	0	45,617	74,075	0	0	1,418	4,389	133,214
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	(62,610)	2,274,412	0	24,212	279,911	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	388,947	368,782	0	145,855	0	(16,994)	2,348,487	0	0	25,630	284,299	133,214	807
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	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0140	BUSINESS IN THE STATE OF	Grand Total	DURING THE YEAR 2023							NAIC Company Code	15580
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	1,520,162	1,622,615	0	746,795	1,047,270	144,098	2,580,004	100,626	106,713	75,754	363,248	(2,742)
2.1 Allied Lines	4,211,511	4,018,311	0	1,999,622	2,417,585	2,021,506	3,006,579	54,198	166,315	194,360	1,113,855	37,447
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	22,395	36,064	0	6,105	0	(10,023)	19,209	0	9	1,519	5,969	.496
3. Farmers Multiple Peril	28,286	22,072	0	23,595	9	1,284	2,732	5	.133	.250	6,498	13
4. Homeowners Multiple Peril	2,522,435	2,598,868	0	1,170,901	1,568,546	1,157,492	814,730	104,892	80,376	45,289	602,674	.172
5.1 Commercial Multiple Peril (Non-Liability Portion)	7,389,699	8,396,665	0	3,014,437	4,331,152	5,121,676	20,412,637	23,225	(37,564)	284,944	1,773,452	53,224
5.2 Commercial Multiple Peril (Liability Portion)	6,634,023	8,160,760	0	2,277,070	4,933,455	4,875,096	17,204,764	428,892	169,564	3,694,463	1,565,791	53,448
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	282,492	240,394	0	151,195	0	(45,813)	50,890	0	(3,275)	2,367	84,519	.349
9. Inland Marine	4,824,295	6,288,244	0	2,326,825	1,094,455	773,207	1,317,822	15,826	123,399	171,224	1,241,236	128,517
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	41,087	40,232	0	19,161	0	7,001	9,349	0	54	.618	10,860	.949
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	1,921	43,982	85,841	21	1,096	2,468	0
17.1 Other Liability - Occurrence	25,167,581	22,990,554	0	12,575,685	42,086,410	21,529,105	132,035,940	2,717,379	2,313,867	11,977,964	5,562,759	.274,669
17.2 Other Liability - Claims-Made	191,340,804	195,298,869	0	83,208,942	34,791,321	42,539,237	135,721,407	28,533,643	35,260,339	99,843,665	55,602,472	3,566,334
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	829,857	1,106,050	0	326,662	298,284	1,258,511	4,103,443	227,769	.343,413	2,318,312	156,257	17,813
18.2 Products Liability - Claims-Made	384,918	409,471	0	116,691	0	0	0	0	0	0	0	23
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	164	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	37,515	46,328	0	6,698	36,665	(35,627)	89,026	36,583	24,578	24,242	6,974	1,259
19.4 Other Commercial Auto Liability	14,593,809	26,914,695	0	4,762,134	35,092,474	22,933,549	59,991,737	3,580,689	2,375,777	6,063,245	2,798,272	680,595
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	4,517,186	9,093,816	0	1,023,662	4,132,835	3,941,382	1,170,471	930,782	.563,458	788,787	.946,474	.205,598
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	.550
24. Surety	4,539	3,827	0	1,969	0	(608)	402	0	(583)	.296	1,362	.250
26. Burglary and Theft	40,230	43,187	0	18,042	(14,903)	(19,058)	29,396	0	(12,156)	8,821	11,829	.861
27. Boiler and Machinery	244,971	279,195	0	95,026	37,684	32,337	10,590	8,776	9,140	3,466	63,057	4,363
28. Credit	8,653	14,305	0	21,949	0	(25,016)	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	4,200	105	0	4,095	0	0	0	0	0	1,313	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	264,650,814	287,624,790	0	113,899,261	131,855,162	106,243,320	378,656,969	36,763,307	41,484,651	125,502,054	72,035,232	5,024,187
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	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 17,710

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8	9	10	11	12	13	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
0499999. Total - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0
0799999. Total - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0
0899999. Total - Affiliates					0	0	0	0	0	0	0	0	0	0
AA-9991105 .00000 . California Commercial Auto Ins Procedure	CA.			83	0	238	238	0	0	51	65			
AA-9991107 .00000 . Colorado Commercial Auto Ins Procedure	CO.			1	0	1	1	0	0	0	0			
AA-9991112 .00000 . Georgia Commercial Auto Ins Procedure	GA.			0	0	0	0	0	0	0	1			
AA-9991115 .00000 . Illinois Commercial Auto Ins Procedure	IL.			17	0	78	78	0	0	12	12			
AA-9991117 .00000 . Indiana Commercial Auto Ins Procedure	IN.			7	0	52	52	0	0	2	7			
AA-9991118 .00000 . Iowa Commercial Auto Ins Procedure	IA.			24	0	192	192	0	0	11	35			
AA-9991119 .00000 . Kansas Commercial Auto Ins Procedure	KS.			1	0	7	7	0	0	0	1			
AA-9991210 .00000 . Kentucky Fair Plan	KY.			1	0	0	0	0	0	0	0			
AA-9990014 .00000 . Missouri Commercial Auto Ins Procedure	MO.			1	0	4	4	0	0	0	0			
AA-9991130 .00000 . Nebraska Commercial Auto Ins Procedure	NE.			0	0	3	3	0	0	0	1			
AA-9991131 .00000 . Nevada Commercial Auto Ins Procedure	NV.			1	0	1	1	0	0	0	0			
AA-0000000 .00000 . New York Commercial Auto Ins Procedure	NY.			0	0	0	0	0	0	0	(1)			
AA-9991137 .00000 . New York Special Risk Distribution Progr	NY.			0	0	6	6	0	0	0	2			
AA-9991139 .00000 . North Carolina Reins Facility	NC.			20	0	5	5	0	0	5	0			
AA-9991141 .00000 . Ohio Commercial Auto Ins Procedure	OH.			10	0	31	31	0	0	7	3			
AA-9991146 .00000 . Rhode Island Commercial Auto Ins Procedure	RI			1	0	1	1	0	0	1	0			
AA-9991225 .00000 . Rhode Island Joint Reins Asn	RI			0	0	2	2	0	0	0	0			
AA-9991151 .00000 . Utah Commercial Auto Ins Procedure	UT			0	0	1	1	0	0	0	0			
AA-9991156 .00000 . West Virginia Commercial Auto Ins Proced	WV			3	0	6	6	0	0	1	1			
1099999. Total Pools, Associations or Other Similar Facilities - Mandatory Pools				170	0	628	628	0	0	90	127	0	0	0
1299999. Total - Pools and Associations				170	0	628	628	0	0	90	127	0	0	0
9999999 Totals				170	0	628	628	0	0	90	127	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectuated or (Cancelled) during Current Year

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
31-1024978 ..	41297 ..	Scottsdale Insurance Company	0H		264,829	11,466	4,520	176,618	40,570	207,435	108,984	113,989	0	663,582	0	26,032	0	637,550	127
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other					264,829	11,466	4,520	176,618	40,570	207,435	108,984	113,989	0	663,582	0	26,032	0	637,550	127
0499999. Total Authorized - Affiliates - U.S. Non-Pool					264,829	11,466	4,520	176,618	40,570	207,435	108,984	113,989	0	663,582	0	26,032	0	637,550	127
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0899999. Total Authorized - Affiliates					264,829	11,466	4,520	176,618	40,570	207,435	108,984	113,989	0	663,582	0	26,032	0	637,550	127
AA-9991159 .. 00000 .. Michigan Claims Cat Fund	MI				(8)	0	0	0	0	0	0	0	0	0	0	(5)	0	5	0
1099999. Total Authorized - Pools - Mandatory Pools					(8)	0	0	0	0	0	0	0	0	0	0	(5)	0	5	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					264,821	11,466	4,520	176,618	40,570	207,435	108,984	113,989	0	663,582	0	26,027	0	637,555	127
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2299999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3299999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3699999. Total Certified - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					264,821	11,466	4,520	176,618	40,570	207,435	108,984	113,989	0	663,582	0	26,027	0	637,555	127
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 Totals					264,821	11,466	4,520	176,618	40,570	207,435	108,984	113,989	0	663,582	0	26,027	0	637,555	127

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 3 (Continued)Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk										Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 28 * 120%)	30	31	32	33	34	35	36
31-1024978 ..	Scottsdale Insurance Company .....	.....	.....	.....	.....	26,159	637,423	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other	0	0	XXX	0	26,159	637,423	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999. Total Authorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	26,159	637,423	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0899999. Total Authorized - Affiliates	0	0	XXX	0	26,159	637,423	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AA-9991159 .. Michigan Claims Cat Fund .....	.....	.....	.....	.....	(5)	5	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999. Total Authorized - Pools - Mandatory Pools	0	0	XXX	0	(5)	5	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	26,154	637,428	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2299999. Total Unauthorized - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3299999. Total Certified - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999. Total Certified - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999. Total Certified - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	0	XXX	0	26,154	637,428	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals	0	0	XXX	0	26,154	637,428	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50										
		37 Current	Overdue																								
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41																				
31-1024978 ..	Scottsdale Insurance Company	15,986					0	15,986		15,986	0	0	0.0	0.0	0.0	YES	0										
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other		15,986	0	0	0	0	0	15,986	0	0	15,986	0	0.0	0.0	0.0	XXX	0										
0499999. Total Authorized - Affiliates - U.S. Non-Pool		15,986	0	0	0	0	0	15,986	0	0	15,986	0	0.0	0.0	0.0	XXX	0										
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
0899999. Total Authorized - Affiliates		15,986	0	0	0	0	0	15,986	0	0	15,986	0	0.0	0.0	0.0	XXX	0										
AA-9991159 ..	Michigan Claims Cat Fund						0	0		0	0	0	0.0	0.0	0.0	YES	0										
1099999. Total Authorized - Pools - Mandatory Pools		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		15,986	0	0	0	0	0	15,986	0	0	15,986	0	0.0	0.0	0.0	XXX	0										
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
2299999. Total Unauthorized - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
3299999. Total Certified - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
3599999. Total Certified - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
3699999. Total Certified - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
5099999. Total Reciprocal Jurisdiction - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		15,986	0	0	0	0	0	15,986	0	0	15,986	0	0.0	0.0	0.0	XXX	0										
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0										
9999999 Totals		15,986	0	0	0	0	0	15,986	0	0	15,986	0	0.0	0.0	0.0	XXX	0										

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)			
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0	66	67	68			
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 45 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67				
31-1024978 ..	Scottsdale Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0499999. Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0899999. Total Authorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-9991159 .. Michigan Claims Cat Fund	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1099999. Total Authorized - Pools - Mandatory Pools		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2299999. Total Unauthorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			
3699999. Total Certified - Affiliates		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5099999. Total Reciprocal Jurisdiction - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			
9999999 Totals		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
				72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([(Col. 47 * 20%) + [Col. 45 * 20%])]	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)	
31-1024978 ..	Scottsdale Insurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other		0	XXX	XXX	0	0	0	0	XXX	XXX	0
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	XXX	XXX	0	0	0	0	XXX	XXX	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0	XXX	XXX	0	0	0	0	XXX	XXX	0
0899999. Total Authorized - Affiliates		0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-9991159 ..	Michigan Claims Cat Fund	0	XXX	XXX	0	0	0	0	XXX	XXX	0
1099999. Total Authorized - Pools - Mandatory Pools		0	XXX	XXX	0	0	0	0	XXX	XXX	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	XXX	XXX	0	0	0	0	XXX	XXX	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
2299999. Total Unauthorized - Affiliates		0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
3299999. Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
3699999. Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	0	XXX	XXX	XXX	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	0	XXX	XXX	XXX	0
5099999. Total Reciprocal Jurisdiction - Affiliates	0	XXX	XXX	0	0	0	0	XXX	XXX	XXX	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	XXX	XXX	0	0	0	0	XXX	XXX	XXX	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	0	0	0	0	0	0	0	0	0	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0	0	0
9999999 Totals		0	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 4

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	<u>1</u> Name of Reinsurer	<u>2</u> Commission Rate	<u>3</u> Ceded Premium
1.
2.
3.
4.
5.

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

	<u>1</u> Name of Reinsurer	<u>2</u> Total Recoverables	<u>3</u> Ceded Premiums	<u>4</u> Affiliated
6.	Scottsdale Insurance Company	663,582	264,829	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>]
7.	0	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
8.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
9.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
10.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	37,251,739	0	37,251,739
2. Premiums and considerations (Line 15)	12,062,176	0	12,062,176
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	15,986,464	(15,986,464)	0
4. Funds held by or deposited with reinsured companies (Line 16.2)	126,838	0	126,838
5. Other assets	3,062,250	0	3,062,250
6. Net amount recoverable from reinsurers		637,424,230	637,424,230
7. Protected cell assets (Line 27)	0	0	0
8. Totals (Line 28)	68,489,467	621,437,766	689,927,233
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	57	533,607,646	533,607,703
10. Taxes, expenses, and other obligations (Lines 4 through 8)	187,001	30	187,031
11. Unearned premiums (Line 9)		113,988,841	113,988,841
12. Advance premiums (Line 10)	0	0	0
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0	0	0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	26,026,609	(26,031,912)	(5,303)
15. Funds held by company under reinsurance treaties (Line 13)	126,838	(126,838)	0
16. Amounts withheld or retained by company for account of others (Line 14)	0	0	0
17. Provision for reinsurance (Line 16)	0	0	0
18. Other liabilities	4,689,092	0	4,689,092
19. Total liabilities excluding protected cell business (Line 26)	31,029,597	621,437,767	652,467,364
20. Protected cell liabilities (Line 27)	0		0
21. Surplus as regards policyholders (Line 37)	37,459,870	XXX	37,459,870
22. Totals (Line 38)	68,489,467	621,437,767	689,927,234

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?

Yes [] No []

If yes, give full explanation: See Notes to Financial Statements #26

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

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

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS
 (\$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	XXX.....	
2. 2014.....	1,141	1,141	0	.137	.137	9	9	32	32	0	0	20	
3. 2015.....	1,314	1,314	0	.295	.295	2	2	35	35	0	0	31	
4. 2016.....	1,390	1,390	0	.270	.270	7	7	37	37	0	0	22	
5. 2017.....	1,448	1,448	0	.986	.986	19	19	47	47	0	0	14	
6. 2018.....	1,487	1,487	0	.502	.502	14	14	46	46	0	0	18	
7. 2019.....	1,631	1,631	0	.812	.812	5	5	68	68	0	0	21	
8. 2020.....	1,865	1,865	0	1,118	1,118	141	141	61	61	0	0	30	
9. 2021.....	2,518	2,518	0	.673	.673	9	9	54	54	0	0	57	
10. 2022.....	2,850	2,850	0	1,906	1,906	21	21	59	59	0	0	54	
11. 2023	2,621	2,621	0	946	946	50	50	78	78	0	0	22	
12. Totals	XXX	XXX	XXX	7,646	7,646	277	277	517	517	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	29
2. 2014.....	(40)	(40)	0	0	0	0	(6)	(6)	0	0	0	0	0
3. 2015.....	(4)	(4)	(1)	(1)	0	0	(1)	(1)	0	0	0	0	0
4. 2016.....	(1)	(1)	0	0	0	0	0	0	0	0	0	0	0
5. 2017.....	.63	.63	.4	.4	0	0	13	13	0	0	0	0	0
6. 2018.....	0	0	1	1	0	0	0	0	1	1	0	0	0
7. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2020.....	0	0	.2	.2	0	0	0	0	7	7	0	0	0
9. 2021.....	0	0	.5	.5	0	0	0	0	1	1	0	0	0
10. 2022.....	158	158	90	90	0	0	7	7	12	12	0	0	1
11. 2023	217	217	344	344	5	5	34	34	69	69	0	0	3
12. Totals	394	394	445	445	5	5	47	47	90	90	0	0	33

	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
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0
2. 2014.....	132	132	0	11.5	11.5	.00	0	0	0.0	0	0
3. 2015.....	327	327	0	24.9	24.9	.00	0	0	0.0	0	0
4. 2016.....	313	313	0	22.5	22.5	.00	0	0	0.0	0	0
5. 2017.....	1,133	1,133	0	78.3	78.3	.00	0	0	0.0	0	0
6. 2018.....	564	564	0	37.9	37.9	.00	0	0	0.0	0	0
7. 2019.....	886	886	0	54.3	54.3	.00	0	0	0.0	0	0
8. 2020.....	1,328	1,328	0	71.2	71.2	.00	0	0	0.0	0	0
9. 2021.....	742	742	0	29.5	29.5	.00	0	0	0.0	0	0
10. 2022.....	2,253	2,253	0	79.0	79.0	.00	0	0	0.0	0	0
11. 2023	1,743	1,743	0	66.5	66.5	.00	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	19.....	19.....	0.....	0.....	0.....	
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	1.....	0.....	0.....	0.....	
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	17.....	17.....	0.....	0.....	0.....	
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
8. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
9. 2021.....	1.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
10. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
11. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	6.....	6.....	0.....	0.....	0.....	0.....	
12. Totals	XXX	XXX	XXX	0	0	0	43	43	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2023.....	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
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	19.....	19.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
3. 2015.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
4. 2016.....	1.....	1.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
5. 2017.....	17.....	17.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
6. 2018.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
7. 2019.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
8. 2020.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
9. 2021.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
10. 2022.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
11. 2023.....	6.....	6.....	0.....	3,437.6.....	3,437.6.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	(4).....	(4).....	4.....	4.....	18.....	18.....	0.....	0.....	XXX.....	
2. 2014.....	36,525.....	36,525.....	0.....	28,745.....	28,745.....	3,242.....	3,242.....	2,456.....	2,456.....	0.....	0.....	1,125.....	
3. 2015.....	34,527.....	34,527.....	0.....	32,314.....	32,314.....	1,812.....	1,812.....	1,888.....	1,888.....	0.....	0.....	918.....	
4. 2016.....	37,062.....	37,062.....	0.....	41,890.....	41,890.....	2,982.....	2,982.....	2,130.....	2,130.....	0.....	0.....	1,046.....	
5. 2017.....	40,889.....	40,889.....	0.....	36,522.....	36,522.....	2,531.....	2,531.....	2,904.....	2,904.....	0.....	0.....	1,147.....	
6. 2018.....	38,830.....	38,830.....	0.....	27,195.....	27,195.....	1,747.....	1,747.....	1,709.....	1,709.....	0.....	0.....	935.....	
7. 2019.....	44,395.....	44,395.....	0.....	32,818.....	32,818.....	1,851.....	1,851.....	1,791.....	1,791.....	0.....	0.....	983.....	
8. 2020.....	44,124.....	44,124.....	0.....	22,000.....	22,000.....	2,255.....	2,255.....	1,722.....	1,722.....	0.....	0.....	642.....	
9. 2021.....	52,725.....	52,725.....	0.....	23,960.....	23,960.....	1,906.....	1,906.....	1,794.....	1,794.....	0.....	0.....	825.....	
10. 2022.....	45,935.....	45,935.....	0.....	13,189.....	13,189.....	936.....	936.....	1,661.....	1,661.....	0.....	0.....	632.....	
11. 2023.....	27,211.....	27,211.....	0.....	2,358.....	2,358.....	185.....	185.....	963.....	963.....	0.....	0.....	311.....	
12. Totals	XXX	XXX	XXX	260,986	260,986	19,451	19,451	19,034	19,034	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21							
	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.....	242.....	242.....	62.....	62.....	1.....	1.....	(2).....	(2).....	17.....	17.....	0.....	0.....	1,595.....			
2. 2014.....	8.....	8.....	14.....	14.....	3.....	3.....	3.....	3.....	52.....	52.....	0.....	0.....	0.....			
3. 2015.....	0.....	0.....	7.....	7.....	(7).....	(7).....	3.....	3.....	(7).....	(7).....	0.....	0.....	0.....			
4. 2016.....	1,012.....	1,012.....	32.....	32.....	5.....	5.....	2.....	2.....	43.....	43.....	0.....	0.....	2.....			
5. 2017.....	8.....	8.....	138.....	138.....	3.....	3.....	56.....	56.....	63.....	63.....	0.....	0.....	0.....			
6. 2018.....	426.....	426.....	194.....	194.....	58.....	58.....	55.....	55.....	64.....	64.....	0.....	0.....	0.....			
7. 2019.....	3,084.....	3,084.....	476.....	476.....	282.....	282.....	151.....	151.....	123.....	123.....	0.....	0.....	4.....			
8. 2020.....	5,033.....	5,033.....	1,606.....	1,606.....	163.....	163.....	448.....	448.....	139.....	139.....	0.....	0.....	7.....			
9. 2021.....	11,294.....	11,294.....	4,574.....	4,574.....	526.....	526.....	1,132.....	1,132.....	387.....	387.....	0.....	0.....	26.....			
10. 2022.....	10,923.....	10,923.....	7,775.....	7,775.....	438.....	438.....	1,501.....	1,501.....	513.....	513.....	0.....	0.....	58.....			
11. 2023.....	4,115.....	4,115.....	9,887.....	9,887.....	176.....	176.....	1,164.....	1,164.....	665.....	665.....	0.....	0.....	107.....			
12. Totals	36,146.....	36,146.....	24,765.....	24,765.....	1,647.....	1,647.....	4,514.....	4,514.....	2,059.....	2,059.....	0.....	0.....	1,799.....			

	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
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	34,522.....	34,522.....	0.....	94.5.....	94.5.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2015.....	36,011.....	36,011.....	0.....	104.3.....	104.3.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. 2016.....	48,097.....	48,097.....	0.....	129.8.....	129.8.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
5. 2017.....	42,225.....	42,225.....	0.....	103.3.....	103.3.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
6. 2018.....	31,449.....	31,449.....	0.....	81.0.....	81.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
7. 2019.....	40,576.....	40,576.....	0.....	91.4.....	91.4.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2020.....	33,364.....	33,364.....	0.....	75.6.....	75.6.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
9. 2021.....	45,573.....	45,573.....	0.....	86.4.....	86.4.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
10. 2022.....	36,935.....	36,935.....	0.....	80.4.....	80.4.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2023.....	19,512.....	19,512.....	0.....	71.7.....	71.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE P - PART 1D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

(\$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.....	2.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
6. 2018.....	89.....	89.....	0.....	101.....	101.....	27.....	27.....	16.....	16.....	0.....	0.....	11.....	
7. 2019.....	132.....	132.....	0.....	2.....	2.....	0.....	0.....	3.....	3.....	0.....	0.....	4.....	
8. 2020.....	9.....	9.....	0.....	0.....	0.....	0.....	0.....	9.....	9.....	0.....	0.....	2.....	
9. 2021.....	(1).....	(1).....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
10. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
11. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
12. Totals	XXX	XXX	XXX	105	105	27	27	28	28	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.....	78.....	78.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....		
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....		
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....		
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....		
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....		
6. 2018.....	0.....	0.....	2.....	2.....	0.....	0.....	1.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....		
7. 2019.....	0.....	0.....	5.....	5.....	0.....	0.....	2.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....		
8. 2020.....	0.....	0.....	1.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....		
9. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....		
10. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....		
11. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....		
12. Totals	78	78	8	8	0	0	2	2	0	0	0	0	0	2		

	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
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
5. 2017.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
6. 2018.....	147.....	147.....	0.....	164.9.....	164.9.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
7. 2019.....	12.....	12.....	0.....	9.4.....	9.4.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2020.....	10.....	10.....	0.....	111.3.....	111.3.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
9. 2021.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
10. 2022.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2023.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								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.....	35.....	35.....	6.....	6.....	52.....	52.....	0.....	0.....	XXX.....	
2. 2014.....	12,880.....	12,880.....	0.....	16,506.....	16,506.....	2,704.....	2,704.....	1,445.....	1,445.....	0.....	0.....	290.....	
3. 2015.....	14,808.....	14,808.....	0.....	7,194.....	7,194.....	983.....	983.....	1,492.....	1,492.....	0.....	0.....	242.....	
4. 2016.....	16,069.....	16,069.....	0.....	12,618.....	12,618.....	827.....	827.....	1,037.....	1,037.....	0.....	0.....	245.....	
5. 2017.....	16,405.....	16,405.....	0.....	38,285.....	38,285.....	1,276.....	1,276.....	4,453.....	4,453.....	0.....	0.....	258.....	
6. 2018.....	17,047.....	17,047.....	0.....	38,424.....	38,424.....	857.....	857.....	3,432.....	3,432.....	0.....	0.....	328.....	
7. 2019.....	18,676.....	18,676.....	0.....	14,031.....	14,031.....	360.....	360.....	3,660.....	3,660.....	0.....	0.....	287.....	
8. 2020.....	17,698.....	17,698.....	0.....	13,625.....	13,625.....	273.....	273.....	1,473.....	1,473.....	0.....	0.....	196.....	
9. 2021.....	15,517.....	15,517.....	0.....	4,711.....	4,711.....	440.....	440.....	742.....	742.....	0.....	0.....	183.....	
10. 2022.....	16,938.....	16,938.....	0.....	4,460.....	4,460.....	175.....	175.....	253.....	253.....	0.....	0.....	154.....	
11. 2023.....	16,557.....	16,557.....	0.....	3,605.....	3,605.....	22.....	22.....	373.....	373.....	0.....	0.....	127.....	
12. Totals	XXX	XXX	XXX	153,495	153,495	7,923	7,923	18,411	18,411	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21							
	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.....	300.....	300.....	73.....	73.....	28.....	28.....	7.....	7.....	177.....	177.....	0.....	0.....	364.....			
2. 2014.....	0.....	0.....	88.....	88.....	0.....	0.....	8.....	8.....	99.....	99.....	0.....	0.....	0.....			
3. 2015.....	200.....	200.....	118.....	118.....	12.....	12.....	8.....	8.....	144.....	144.....	0.....	0.....	1.....			
4. 2016.....	0.....	0.....	238.....	238.....	0.....	0.....	23.....	23.....	193.....	193.....	0.....	0.....	0.....			
5. 2017.....	13.....	13.....	364.....	364.....	0.....	0.....	51.....	51.....	232.....	232.....	0.....	0.....	1.....			
6. 2018.....	1,229.....	1,229.....	588.....	588.....	84.....	84.....	94.....	94.....	414.....	414.....	0.....	0.....	4.....			
7. 2019.....	2,186.....	2,186.....	836.....	836.....	478.....	478.....	226.....	226.....	515.....	515.....	0.....	0.....	6.....			
8. 2020.....	16,257.....	16,257.....	2,013.....	2,013.....	291.....	291.....	358.....	358.....	358.....	358.....	0.....	0.....	5.....			
9. 2021.....	2,000.....	2,000.....	1,439.....	1,439.....	292.....	292.....	484.....	484.....	427.....	427.....	0.....	0.....	12.....			
10. 2022.....	1,340.....	1,340.....	3,296.....	3,296.....	174.....	174.....	838.....	838.....	667.....	667.....	0.....	0.....	22.....			
11. 2023.....	1,469.....	1,469.....	5,880.....	5,880.....	181.....	181.....	926.....	926.....	903.....	903.....	0.....	0.....	43.....			
12. Totals	24,994	24,994	14,933	14,933	1,540	1,540	3,025	3,025	4,128	4,128	0	0	458			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	20,850.....	20,850.....	0.....	161.9.....	161.9.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2015.....	10,151.....	10,151.....	0.....	68.6.....	68.6.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. 2016.....	14,935.....	14,935.....	0.....	92.9.....	92.9.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
5. 2017.....	44,675.....	44,675.....	0.....	272.3.....	272.3.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
6. 2018.....	45,123.....	45,123.....	0.....	264.7.....	264.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
7. 2019.....	22,292.....	22,292.....	0.....	119.4.....	119.4.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2020.....	34,648.....	34,648.....	0.....	195.8.....	195.8.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
9. 2021.....	10,536.....	10,536.....	0.....	67.9.....	67.9.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
10. 2022.....	11,203.....	11,203.....	0.....	66.1.....	66.1.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2023.....	13,359.....	13,359.....	0.....	80.7.....	80.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2014.....													
3. 2015.....													
4. 2016.....													
5. 2017.....													
6. 2018.....													
7. 2019.....													
8. 2020.....													
9. 2021.....													
10. 2022.....													
11. 2023.....													
12. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2014.....													
3. 2015.....													
4. 2016.....													
5. 2017.....													
6. 2018.....													
7. 2019.....													
8. 2020.....													
9. 2021.....													
10. 2022.....													
11. 2023.....													
12. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2014.....											
3. 2015.....											
4. 2016.....											
5. 2017.....											
6. 2018.....											
7. 2019.....											
8. 2020.....											
9. 2021.....											
10. 2022.....											
11. 2023.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE
 (\$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.....	XXX.....	
2. 2014.....	(13).....	(13).....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
3. 2015.....	(1).....	(1).....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
8. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
9. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
10. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
11. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2023.....	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
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
3. 2015.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
4. 2016.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
5. 2017.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
6. 2018.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
7. 2019.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
8. 2020.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
9. 2021.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
10. 2022.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
11. 2023.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)

(\$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. 2014	339	339	0	305	305	0	0	4	4	0	0	XXX	
3. 2015	365	365	0	4	4	0	0	3	3	0	0	XXX	
4. 2016	394	394	0	0	0	0	0	0	0	0	0	XXX	
5. 2017	454	454	0	31	31	0	0	1	1	0	0	XXX	
6. 2018	418	418	0	59	59	0	0	3	3	0	0	XXX	
7. 2019	458	458	0	83	83	0	0	1	1	0	0	XXX	
8. 2020	548	548	0	0	0	9	9	2	2	0	0	XXX	
9. 2021	476	476	0	0	0	0	0	1	1	0	0	XXX	
10. 2022	446	446	0	26	26	0	0	1	1	0	0	XXX	
11. 2023	520	520	0	33	33	0	0	1	1	0	0	XXX	
12. Totals	XXX	XXX	XXX	541	541	9	9	17	17	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	1			
2. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0			
3. 2015	0	0	0	0	0	0	0	0	0	0	0	0	0			
4. 2016	0	0	0	0	0	0	0	0	0	0	0	0	0			
5. 2017	0	0	0	0	0	0	0	0	0	0	0	0	0			
6. 2018	0	0	0	0	0	0	0	0	0	0	0	0	0			
7. 2019	0	0	0	0	3	3	0	0	1	1	0	0	0			
8. 2020	0	0	3	3	0	0	(1)	(1)	3	3	0	0	0			
9. 2021	0	0	5	5	0	0	0	0	0	0	0	0	0			
10. 2022	0	0	4	4	0	0	2	2	1	1	0	0	0			
11. 2023	0	0	49	49	0	0	2	2	4	4	0	0	0			
12. Totals	0	0	61	61	3	3	3	3	9	9	0	0	1			

	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. 2014	309	309	0	91.1	91.1	0.0	0	0	0.0	0	0
3. 2015	7	7	0	1.9	1.9	0.0	0	0	0.0	0	0
4. 2016	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2017	32	32	0	7.1	7.1	0.0	0	0	0.0	0	0
6. 2018	62	62	0	14.8	14.8	0.0	0	0	0.0	0	0
7. 2019	88	88	0	19.3	19.3	0.0	0	0	0.0	0	0
8. 2020	15	15	0	2.8	2.8	0.0	0	0	0.0	0	0
9. 2021	6	6	0	1.3	1.3	0.0	0	0	0.0	0	0
10. 2022	33	33	0	7.5	7.5	0.0	0	0	0.0	0	0
11. 2023	89	89	0	17.2	17.2	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								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.....	1,475	1,475	151	151	15	15	0	0	XXX.....	
2. 2014.....	47,389	47,389	0	30,053	30,053	2,936	2,936	1,877	1,877	0	0	426	
3. 2015.....	54,469	54,469	0	48,874	48,874	2,591	2,591	5,449	5,449	0	0	446	
4. 2016.....	69,060	69,060	0	47,460	47,460	4,602	4,602	1,912	1,912	0	0	414	
5. 2017.....	60,603	60,603	0	41,282	41,282	3,708	3,708	2,349	2,349	0	0	434	
6. 2018.....	50,719	50,719	0	31,697	31,697	1,494	1,494	1,631	1,631	0	0	371	
7. 2019.....	46,796	46,796	0	29,586	29,586	1,537	1,537	1,873	1,873	0	0	302	
8. 2020.....	40,404	40,404	0	16,093	16,093	926	926	979	979	0	0	164	
9. 2021.....	29,495	29,495	0	8,693	8,693	656	656	913	913	0	0	174	
10. 2022.....	23,642	23,642	0	3,996	3,996	77	77	589	589	0	0	196	
11. 2023.....	22,991	22,991	0	434	434	35	35	181	181	0	0	103	
12. Totals	XXX	XXX	XXX	259,644	259,644	18,713	18,713	17,770	17,770	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	1,835	1,835	.993	.993	(164)	(164)	138	138	281	281	0	0	1,781
2. 2014.....	1,831	1,831	.956	.956	201	201	109	109	182	182	0	0	3
3. 2015.....	4,655	4,655	1,536	1,536	232	232	202	202	260	260	0	0	3
4. 2016.....	17,725	17,725	3,359	3,359	642	642	475	475	372	372	0	0	7
5. 2017.....	22,375	22,375	1,878	1,878	434	434	424	424	388	388	0	0	11
6. 2018.....	6,562	6,562	2,805	2,805	126	126	.296	.296	551	551	0	0	17
7. 2019.....	4,856	4,856	6,598	6,598	155	155	.794	.794	552	552	0	0	19
8. 2020.....	5,333	5,333	8,705	8,705	261	261	.979	.979	628	628	0	0	.27
9. 2021.....	8,248	8,248	10,004	10,004	858	858	1,361	1,361	546	546	0	0	28
10. 2022.....	1,838	1,838	9,093	9,093	623	623	1,746	1,746	837	837	0	0	.39
11. 2023.....	2,203	2,203	8,636	8,636	286	286	1,796	1,796	1,046	1,046	0	0	51
12. Totals	77,463	77,463	54,563	54,563	3,655	3,655	8,320	8,320	5,645	5,645	0	0	1,986

	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
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0
2. 2014.....	38,148	38,148	0	80.5	80.5	.00	0	0	0.0	0	0
3. 2015.....	63,799	63,799	0	117.1	117.1	.00	0	0	0.0	0	0
4. 2016.....	76,547	76,547	0	110.8	110.8	.00	0	0	0.0	0	0
5. 2017.....	72,839	72,839	0	120.2	120.2	.00	0	0	0.0	0	0
6. 2018.....	45,162	45,162	0	89.0	89.0	.00	0	0	0.0	0	0
7. 2019.....	45,952	45,952	0	98.2	98.2	.00	0	0	0.0	0	0
8. 2020.....	33,904	33,904	0	83.9	83.9	.00	0	0	0.0	0	0
9. 2021.....	31,279	31,279	0	106.0	106.0	.00	0	0	0.0	0	0
10. 2022.....	18,799	18,799	0	79.5	79.5	.00	0	0	0.0	0	0
11. 2023.....	14,618	14,618	0	63.6	63.6	.00	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								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.....	33.....	33.....	3.....	3.....	0.....	0.....	0.....	0.....	XXX.....	
2. 2014.....	100,299.....	100,299.....	0.....	52,364.....	52,364.....	23,117.....	23,117.....	2,473.....	2,473.....	0.....	0.....	366.....	
3. 2015.....	108,988.....	108,988.....	0.....	30,396.....	30,396.....	15,677.....	15,677.....	2,893.....	2,893.....	0.....	0.....	323.....	
4. 2016.....	115,523.....	115,523.....	0.....	31,953.....	31,953.....	19,559.....	19,559.....	2,229.....	2,229.....	0.....	0.....	289.....	
5. 2017.....	116,744.....	116,744.....	0.....	29,388.....	29,388.....	26,433.....	26,433.....	1,801.....	1,801.....	0.....	0.....	274.....	
6. 2018.....	118,601.....	118,601.....	0.....	32,150.....	32,150.....	29,486.....	29,486.....	1,921.....	1,921.....	0.....	0.....	329.....	
7. 2019.....	116,367.....	116,367.....	0.....	36,430.....	36,430.....	27,760.....	27,760.....	4,161.....	4,161.....	0.....	0.....	344.....	
8. 2020.....	129,165.....	129,165.....	0.....	29,086.....	29,086.....	28,415.....	28,415.....	2,881.....	2,881.....	0.....	0.....	350.....	
9. 2021.....	169,374.....	169,374.....	0.....	29,553.....	29,553.....	19,759.....	19,759.....	3,012.....	3,012.....	0.....	0.....	314.....	
10. 2022.....	200,514.....	200,514.....	0.....	17,564.....	17,564.....	14,442.....	14,442.....	7,920.....	7,920.....	0.....	0.....	276.....	
11. 2023.....	195,299.....	195,299.....	0.....	5,596.....	5,596.....	2,442.....	2,442.....	2,208.....	2,208.....	0.....	0.....	146.....	
12. Totals	XXX.....	XXX.....	XXX.....	294,512.....	294,512.....	207,093.....	207,093.....	31,498.....	31,498.....	0.....	0.....	XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Case Basis							
	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.....	10,000.....	10,000.....	400.....	400.....	0.....	0.....	18.....	18.....	213.....	213.....	0.....	0.....	598.....			
2. 2014.....	0.....	0.....	883.....	883.....	46.....	46.....	178.....	178.....	2.....	2.....	0.....	0.....	0.....			
3. 2015.....	0.....	0.....	889.....	889.....	0.....	0.....	177.....	177.....	3.....	3.....	0.....	0.....	0.....			
4. 2016.....	25.....	25.....	488.....	488.....	424.....	424.....	187.....	187.....	20.....	20.....	0.....	0.....	1.....			
5. 2017.....	15.....	15.....	1,419.....	1,419.....	718.....	718.....	1,982.....	1,982.....	52.....	52.....	0.....	0.....	0.....			
6. 2018.....	742.....	742.....	4,383.....	4,383.....	1,397.....	1,397.....	947.....	947.....	139.....	139.....	0.....	0.....	1.....			
7. 2019.....	850.....	850.....	4,376.....	4,376.....	1,328.....	1,328.....	2,373.....	2,373.....	288.....	288.....	0.....	0.....	2.....			
8. 2020.....	1,527.....	1,527.....	6,049.....	6,049.....	1,378.....	1,378.....	3,536.....	3,536.....	346.....	346.....	0.....	0.....	6.....			
9. 2021.....	5,056.....	5,056.....	11,039.....	11,039.....	6,348.....	6,348.....	7,350.....	7,350.....	1,283.....	1,283.....	0.....	0.....	21.....			
10. 2022.....	6,158.....	6,158.....	33,196.....	33,196.....	10,530.....	10,530.....	23,703.....	23,703.....	2,854.....	2,854.....	0.....	0.....	59.....			
11. 2023.....	6,667.....	6,667.....	43,813.....	43,813.....	7,916.....	7,916.....	29,588.....	29,588.....	4,533.....	4,533.....	0.....	0.....	105.....			
12. Totals	31,040.....	31,040.....	106,935.....	106,935.....	30,084.....	30,084.....	70,039.....	70,039.....	9,733.....	9,733.....	0.....	0.....	793.....			

	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
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	79,063.....	79,063.....	0.....	78.8.....	78.8.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2015.....	50,035.....	50,035.....	0.....	45.9.....	45.9.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. 2016.....	54,885.....	54,885.....	0.....	47.5.....	47.5.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
5. 2017.....	61,808.....	61,808.....	0.....	52.9.....	52.9.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
6. 2018.....	71,164.....	71,164.....	0.....	60.0.....	60.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
7. 2019.....	77,566.....	77,566.....	0.....	66.7.....	66.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2020.....	73,218.....	73,218.....	0.....	56.7.....	56.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
9. 2021.....	83,399.....	83,399.....	0.....	49.2.....	49.2.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
10. 2022.....	116,366.....	116,366.....	0.....	58.0.....	58.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2023.....	102,763.....	102,763.....	0.....	52.6.....	52.6.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
**SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)**
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								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	1,507	1,507	42	42	71	71	0	0	XXX	
2. 2022	12,120	12,120	0	3,680	3,680	64	64	364	364	0	0	XXX	
3. 2023	12,049	12,049	0	2,320	2,320	115	115	254	254	0	0	XXX	
4. Totals	XXX	XXX	XXX	7,508	7,508	222	222	690	690	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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	3,249	3,249	456	456	18	18	114	114	89	89	0	0	159			
2. 2022	48	48	573	573	3	3	77	77	74	74	0	0	1			
3. 2023	580	580	2,047	2,047	33	33	205	205	514	514	0	0	8			
4. Totals	3,877	3,877	3,076	3,076	54	54	397	397	676	676	0	0	168			

	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. 2022	4,883	4,883	0	40.3	40.3	0.0	0	0	0.0	0	0
3. 2023	6,068	6,068	0	50.4	50.4	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	(209)	(209)	913	913	56	56	0	0	XXX.....	
2. 2022.....	16,866	16,866	0	6,205	6,205	17	17	904	904	0	0	364	
3. 2023	9,094	9,094	0	3,387	3,387	5	5	283	283	0	0	190	
4. Totals	XXX	XXX	XXX	9,382	9,382	936	936	1,243	1,243	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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.....	118	118	76	76	228	228	190	190	95	95	0	0	289			
2. 2022.....	196	196	(98)	(98)	26	26	191	191	110	110	0	0	6			
3. 2023	703	703	178	178	20	20	135	135	375	375	0	0	44			
4. Totals	1,016	1,016	155	155	274	274	515	515	580	580	0	0	339			

	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
1. Prior	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0
2. 2022.....	7,549	7,549	0	44.8	44.8	0.0	0	0	0.0	0	0
3. 2023	5,085	5,085	0	55.9	55.9	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE P - PART 1K - FIDELITY/SURETY

(\$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.....	XXX.....	
2. 2022.....	3.....	3.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	
3. 2023.....	4.....	4.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	
4. Totals.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
3. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
4. 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.....	0.....	0.....	XXX.....	0.....	0.....
2. 2022.....	0.....	0.....	0.....	17.0.....	17.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2023.....	1.....	1.....	0.....	15.7.....	15.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)
 (\$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	XXX.....	
2. 2022.....	18	18	0	0	0	0	0	0	0	0	0	XXX.....	
3. 2023	14	14	0	0	0	0	0	0	0	0	0	XXX	
4. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0			
3. 2023	0	0	0	0	0	0	0	0	0	0	0	0	0			
4. 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.....	0	0	XXX.....	0	0
2. 2022.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2023	0	0	0	0.1	0.1	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1M - International

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								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.....	6.....	6.....	0.....	0.....	0.....	0.....	XXX.....	
2. 2014.....	396.....	396.....	0.....	100.....	100.....	53.....	53.....	9.....	9.....	0.....	0.....	11.....	
3. 2015.....	347.....	347.....	0.....	14.....	14.....	0.....	0.....	2.....	2.....	0.....	0.....	2.....	
4. 2016.....	1,122.....	1,122.....	0.....	1,619.....	1,619.....	0.....	0.....	10.....	10.....	0.....	0.....	9.....	
5. 2017.....	704.....	704.....	0.....	215.....	215.....	74.....	74.....	16.....	16.....	0.....	0.....	10.....	
6. 2018.....	189.....	189.....	0.....	66.....	66.....	73.....	73.....	10.....	10.....	0.....	0.....	6.....	
7. 2019.....	192.....	192.....	0.....	203.....	203.....	35.....	35.....	16.....	16.....	0.....	0.....	9.....	
8. 2020.....	228.....	228.....	0.....	32.....	32.....	38.....	38.....	20.....	20.....	0.....	0.....	9.....	
9. 2021.....	529.....	529.....	0.....	215.....	215.....	17.....	17.....	8.....	8.....	0.....	0.....	7.....	
10. 2022.....	1,249.....	1,249.....	0.....	20.....	20.....	93.....	93.....	23.....	23.....	0.....	0.....	21.....	
11. 2023.....	1,106.....	1,106.....	0.....	11.....	11.....	59.....	59.....	8.....	8.....	0.....	0.....	16.....	
12. Totals	XXX	XXX	XXX	2,495	2,495	448	448	123	123	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21							
	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						
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded						
1. Prior.....	0.....	0.....	55.....	55.....	340.....	340.....	33.....	33.....	14.....	14.....	0.....	0.....	35.....			
2. 2014.....	0.....	0.....	48.....	48.....	0.....	0.....	45.....	45.....	8.....	8.....	0.....	0.....	0.....			
3. 2015.....	0.....	0.....	50.....	50.....	0.....	0.....	60.....	60.....	4.....	4.....	0.....	0.....	0.....			
4. 2016.....	0.....	0.....	57.....	57.....	0.....	0.....	48.....	48.....	3.....	3.....	0.....	0.....	0.....			
5. 2017.....	15.....	15.....	145.....	145.....	43.....	43.....	105.....	105.....	40.....	40.....	0.....	0.....	1.....			
6. 2018.....	0.....	0.....	95.....	95.....	28.....	28.....	98.....	98.....	18.....	18.....	0.....	0.....	0.....			
7. 2019.....	0.....	0.....	183.....	183.....	0.....	0.....	120.....	120.....	6.....	6.....	0.....	0.....	0.....			
8. 2020.....	86.....	86.....	265.....	265.....	142.....	142.....	169.....	169.....	29.....	29.....	0.....	0.....	3.....			
9. 2021.....	75.....	75.....	324.....	324.....	23.....	23.....	228.....	228.....	12.....	12.....	0.....	0.....	2.....			
10. 2022.....	1,190.....	1,190.....	417.....	417.....	141.....	141.....	246.....	246.....	18.....	18.....	0.....	0.....	4.....			
11. 2023.....	244.....	244.....	854.....	854.....	81.....	81.....	367.....	367.....	39.....	39.....	0.....	0.....	8.....			
12. Totals	1,610	1,610	2,493	2,493	799	799	1,519	1,519	192	192	0	0	53			

	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
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	263.....	263.....	0.....	66.5.....	66.5.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2015.....	129.....	129.....	0.....	37.2.....	37.2.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. 2016.....	1,737.....	1,737.....	0.....	154.9.....	154.9.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
5. 2017.....	652.....	652.....	0.....	92.7.....	92.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
6. 2018.....	388.....	388.....	0.....	205.4.....	205.4.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
7. 2019.....	564.....	564.....	0.....	293.9.....	293.9.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2020.....	782.....	782.....	0.....	342.8.....	342.8.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
9. 2021.....	903.....	903.....	0.....	170.6.....	170.6.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
10. 2022.....	2,149.....	2,149.....	0.....	172.0.....	172.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2023.....	1,664.....	1,664.....	0.....	150.4.....	150.4.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE
 (\$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.....	XXX.....	
2. 2014.....	0.....	0.....	0.....	13.....	13.....	22.....	22.....	0.....	0.....	0.....	0.....	0.....	
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	1.....	0.....	0.....	0.....	
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
8. 2020.....	7.....	7.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
9. 2021.....	351.....	351.....	0.....	0.....	0.....	0.....	0.....	1.....	1.....	0.....	0.....	0.....	
10. 2022.....	483.....	483.....	0.....	5.....	5.....	0.....	0.....	1.....	1.....	0.....	0.....	0.....	
11. 2023.....	409.....	409.....	0.....	0.....	0.....	0.....	0.....	1.....	1.....	0.....	0.....	0.....	
12. Totals	XXX	XXX	XXX	18	18	22	22	4	4	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2023.....	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
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	35.....	35.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
3. 2015.....	1.....	1.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
4. 2016.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
5. 2017.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
6. 2018.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
7. 2019.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
8. 2020.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
9. 2021.....	1.....	1.....	0.....	0.3.....	0.3.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
10. 2022.....	6.....	6.....	0.....	1.3.....	1.3.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
11. 2023.....	1.....	1.....	0.....	0.3.....	0.3.....	0.0.....	0.....	0.....	0.0.....	0.0.....	0.0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 1S - FINANCIAL GUARANTY/MORTGAGE GUARANTY
 (\$000 OMITTED)

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

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior																
2. 2022.....																
3. 2023																
4. Totals																

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....
2. 2022.....											
3. 2023											
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE P - PART 1T - WARRANTY

(\$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.....	XXX.....	
2. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
3. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
4. Totals.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
3. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
4. 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.....	0.....	0.....	XXX.....	0.....	0.....
2. 2022.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2023.....	0.....	0.....	0.....	23.7.....	23.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

Schedule P - Part 2A - Homeowners/Farmowners

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 2E - Commercial Multiple Peril

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 2I - Special Property

N O N E

Schedule P - Part 2J - Auto Physical Damage

N O N E

Schedule P - Part 2K - Fidelity/Surety

N O N E

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

N O N E

Schedule P - Part 2M - International

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 2T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	10.....	10.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	21.....	10.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	13.....	9.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	9.....	5.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	15.....	3.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	17.....	4.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	16.....	14.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	42.....	15.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	32.....	21.....
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	7	12

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

1. Prior.....	000.....											
2. 2014.....	0.....											
3. 2015.....	XXX.....											
4. 2016.....	XXX.....	XXX.....										
5. 2017.....	XXX.....	XXX.....	XXX.....									
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....							
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....						
9. 2021.....	XXX.....											
10. 2022.....	XXX.....											
11. 2023	XXX	XXX										

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

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	201.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	688.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	525.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	576.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	650.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	548.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	573.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	359.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	432.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	294.....
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	110	94

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

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	10.....	1.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	2.....	2.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	2.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	59.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	147.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	129.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	125.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	144.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	168.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	131.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	67.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	86.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	63.....
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	46

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....000.....												
2. 2014.....0.....												
3. 2015.....XXX.....												
4. 2016.....XXX.....XXX.....												
5. 2017.....XXX.....XXX.....XXX.....												
6. 2018.....XXX.....XXX.....X.....												
7. 2019.....XXX.....XXX.....XXX.....XXX.....												
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

NONE

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

1. Prior.....000.....	0	0	0	0	0	0	0	0	0	0	0	2
2. 2014.....0.....0.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2017.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2018.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2019.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	0

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

1. Prior.....000.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
2. 2014.....0.....0.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
3. 2015.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
4. 2016.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
5. 2017.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
6. 2018.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
7. 2019.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....

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

1. Prior.....000.....	0	0	0	0	0	0	0	0	0	0	0	164
2. 2014.....0.....0.....	0	0	0	0	0	0	0	0	0	0	0	223
3. 2015.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	230
4. 2016.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	213
5. 2017.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	213
6. 2018.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	194
7. 2019.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	192
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	199
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	155
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	74
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	63

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

1. Prior.....000.....	0	0	0	0	0	0	0	0	0	0	0	207
2. 2014.....0.....0.....	0	0	0	0	0	0	0	0	0	0	0	236
3. 2015.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	218
4. 2016.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	195
5. 2017.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	191
6. 2018.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	83
7. 2019.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	247
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	70
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	256
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	88
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....0.....	0	0	0	0	0	0	0	0	0	0	0	12

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
2. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
3. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	000.....	0.....	0.....						
2. 2022.....	XXX.....	0.....	0.....	228.....	130.....							
3. 2023.....	XXX.....	0.....	105.....	41.....								

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX.....	000.....	XXX.....	XXX.....						
2. 2022.....	XXX.....	XXX.....	XXX.....							
3. 2023.....	XXX.....	XXX.....	XXX.....							

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

1. Prior.....	XXX.....	000.....	XXX.....	XXX.....						
2. 2022.....	XXX.....	XXX.....	XXX.....							
3. 2023.....	XXX.....	XXX.....	XXX.....							

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	000.....	XXX.....	XXX.....
2. 2014.....	XXX.....	XXX.....
3. 2015.....	XXX.....	XXX.....	XXX.....
4. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....
5. 2017.....	XXX.....	XXX.....	XXX.....							
6. 2018.....	XXX.....	XXX.....	XXX.....							
7. 2019.....	XXX.....	XXX.....	XXX.....							
8. 2020.....	XXX.....	XXX.....	XXX.....							
9. 2021.....	XXX.....	XXX.....	XXX.....							
10. 2022.....	XXX.....	XXX.....	XXX.....							
11. 2023.....	XXX.....	XXX.....	XXX.....								

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....000.....											XXX.....	XXX.....
2. 2014.....											XXX.....	XXX.....
3. 2015.....XXX.....											XXX.....	XXX.....
4. 2016.....XXX.....XXX.....											XXX.....	XXX.....
5. 2017.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
6. 2018.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
7. 2019.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....

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

1. Prior.....000.....											XXX.....	XXX.....
2. 2014.....											XXX.....	XXX.....
3. 2015.....XXX.....											XXX.....	XXX.....
4. 2016.....XXX.....XXX.....											XXX.....	XXX.....
5. 2017.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
6. 2018.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
7. 2019.....XXX.....XXX.....XXX.....XXX.....XX.....											XXX.....	XXX.....
8. 2020.....XXX.....XXX.....XXX.....XXX.....XX.....XX.....											XXX.....	XXX.....
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....											XXX.....	XXX.....
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....											XXX.....	XXX.....
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....											XXX.....	XXX.....

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

1. Prior.....000.....											XXX.....	XXX.....
2. 2014.....											XXX.....	XXX.....
3. 2015.....XXX.....											XXX.....	XXX.....
4. 2016.....XXX.....XXX.....											XXX.....	XXX.....
5. 2017.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
6. 2018.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
7. 2019.....XXX.....XXX.....XXX.....XXX.....XX.....											XXX.....	XXX.....
8. 2020.....XXX.....XXX.....XXX.....XXX.....XX.....XX.....											XXX.....	XXX.....
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....											XXX.....	XXX.....
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....											XXX.....	XXX.....
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....											XXX.....	XXX.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	99.....	.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	4.....	7.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	1.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	6.....	3.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	7.....	2.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	5.....	1.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	7.....	2.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	4.....	2.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	3.....	2.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	5.....	12.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	2.....	6.....

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

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....

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

1. Prior.....	XXX.....											
2. 2022.....	XXX.....											
3. 2023.....	XXX.....											

SCHEDULE P - PART 3T - WARRANTY

1. Prior.....	XXX.....											
2. 2022.....	XXX.....											
3. 2023.....	XXX.....											

NONE

Schedule P - Part 4A - Homeowners/Farmowners

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 4E - Commercial Multiple Peril

N O N E

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

N O N E

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

N O N E

Schedule P - Part 4G - Special Liability

N O N E

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

N O N E

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

N O N E

Schedule P - Part 4I - Special Property

N O N E

Schedule P - Part 4J - Auto Physical Damage

N O N E

Schedule P - Part 4K - Fidelity/Surety

N O N E

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

N O N E

Schedule P - Part 4M - International

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 4T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	1	1	0	0	0	0	0	0	0	0
2. 2014	8	10	10	10	10	10	10	10	10	10
3. 2015	XXX	18	20	21	21	21	21	21	21	21
4. 2016	XXX	XXX	13	13	13	13	13	13	13	13
5. 2017	XXX	XXX	XXX	6	8	9	9	9	9	9
6. 2018	XXX	XXX	XXX	XXX	12	15	15	15	15	15
7. 2019	XXX	XXX	XXX	XXX	XXX	12	16	17	17	17
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	9	15	16	16
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	28	42	42
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	32
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	29	29	29	29	29	0	29	29	29	29
2. 2014	0	0	0	0	0	0	0	0	0	0
3. 2015	XXX	4	1	0	0	0	0	0	0	0
4. 2016	XXX	XXX	2	0	0	0	0	0	0	0
5. 2017	XXX	XXX	XXX	3	1	(1)	0	0	0	0
6. 2018	XXX	XXX	XXX	XXX	5	0	0	0	0	0
7. 2019	XXX	XXX	XXX	XXX	XXX	(1)	1	0	0	0
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	9	1	1	0
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	0	0
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	1
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	2	2	0	0	0	0	0	0	0	0
2. 2014	17	20	20	20	20	20	20	20	20	20
3. 2015	XXX	30	31	31	31	31	31	31	31	31
4. 2016	XXX	XXX	21	22	22	22	22	22	22	22
5. 2017	XXX	XXX	XXX	11	14	13	14	14	14	14
6. 2018	XXX	XXX	XXX	XXX	18	18	18	18	18	18
7. 2019	XXX	XXX	XXX	XXX	XXX	13	21	21	21	21
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	25	29	30	30
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	46	57	57
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50	54
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
**SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX								
5. 2017	XXX	XXX	XX							
6. 2018	XXX	XXX	XX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX								
5. 2017	XXX	XXX	XX							
6. 2018	XXX	XXX	XX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX								
5. 2017	XXX	XXX	XX							
6. 2018	XXX	XXX	XX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

NONE

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	313	110	59	25	1	5	1	0	0	0
2. 2014	335	560	626	660	681	683	685	687	688	688
3. 2015	XXX	272	442	478	503	520	524	525	525	525
4. 2016	XXX	XXX	255	472	529	562	574	575	576	576
5. 2017	XXX	XXX	XXX	323	519	586	614	635	646	650
6. 2018	XXX	XXX	XXX	XXX	277	455	507	524	539	548
7. 2019	XXX	XXX	XXX	XXX	XXX	302	480	535	556	573
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	183	308	340	359
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	217	377	432
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	172	294
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	110

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	1,750	1,656	1,615	1,601	1,601	0	1,595	1,595	1,595	1,595
2. 2014	375	96	43	16	0	0	2	0	0	0
3. 2015	XXX	309	73	36	11	(1)	0	0	0	0
4. 2016	XXX	XXX	391	82	29	(1)	0	2	0	2
5. 2017	XXX	XXX	XXX	373	92	(5)	26	10	2	0
6. 2018	XXX	XXX	XXX	XXX	316	(5)	28	14	7	0
7. 2019	XXX	XXX	XXX	XXX	XXX	18	86	30	15	4
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	238	58	28	7
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	295	71	26
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	218	58
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	107

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	142	57	32	14	1	0	1	0	0	0
2. 2014	952	1,049	1,093	1,104	1,114	1,118	1,123	1,124	1,125	1,125
3. 2015	XXX	790	876	898	907	912	917	918	918	918
4. 2016	XXX	XXX	885	987	1,017	1,025	1,039	1,043	1,044	1,046
5. 2017	XXX	XXX	XXX	981	1,067	1,061	1,132	1,141	1,145	1,147
6. 2018	XXX	XXX	XXX	XXX	798	807	916	924	933	935
7. 2019	XXX	XXX	XXX	XXX	XXX	538	927	952	969	983
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	571	620	640	642
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	733	800	825
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	573	632
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	311

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE P - PART 5D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	0	0	0	0	0	0	0	0	0	1
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	2	5	10	10	10	10
7. 2019.....	XXX	XXX	XXX	XXX	XXX	2	2	2	2	2
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	134	134	134	134	134	0	134	4	3	2
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	22	5	109	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	9	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	4	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	25	11	120	11	11	11
7. 2019.....	XXX	XXX	XXX	XXX	XXX	4	13	4	4	4
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	6	2	2	2
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	57	30	16	3	3	3	0	2	1	1
2. 2014	57	101	125	138	140	144	146	147	147	147
3. 2015	XXX	71	105	119	124	126	128	128	128	129
4. 2016	XXX	XXX	62	92	104	111	118	123	125	125
5. 2017	XXX	XXX	XXX	64	104	123	131	139	143	144
6. 2018	XXX	XXX	XXX	XXX	83	120	145	156	166	168
7. 2019	XXX	XXX	XXX	XXX	XXX	54	97	109	116	131
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	26	59	64	67
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50	79	86
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	63
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	403	388	374	366	365	0	365	363	364	364
2. 2014	89	38	14	3	1	0	2	0	0	0
3. 2015	XXX	78	26	11	5	0	1	0	0	1
4. 2016	XXX	XXX	64	20	21	(1)	4	2	0	0
5. 2017	XXX	XXX	XXX	83	29	0	12	5	1	1
6. 2018	XXX	XXX	XXX	XXX	102	(1)	25	12	5	4
7. 2019	XXX	XXX	XXX	XXX	XXX	0	32	24	16	6
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	65	14	9	5
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51	17	12
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	22
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	47	31	8	1	2	2	4	2	2	3
2. 2014	205	252	268	278	278	282	289	290	290	290
3. 2015	XXX	193	224	232	236	236	239	239	240	242
4. 2016	XXX	XXX	175	207	230	222	239	242	244	245
5. 2017	XXX	XXX	XXX	192	227	229	254	255	257	258
6. 2018	XXX	XXX	XXX	XXX	241	242	310	319	325	328
7. 2019	XXX	XXX	XXX	XXX	XXX	117	247	271	277	287
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	166	182	192	196
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	142	171	183
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	123	154
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	127

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX								
5. 2017	XXX	XXX	XX							
6. 2018	XXX	XXX	XX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX								
5. 2017	XXX	XXX	XX							
6. 2018	XXX	XXX	XX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX								
5. 2017	XXX	XXX	XX							
6. 2018	XXX	XXX	XX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	0	2	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	0	4	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	80	66	38	27	19	4	5	2	1	2
2. 2014	36	83	122	151	187	205	208	211	217	223
3. 2015	XXX	28	63	96	143	199	214	220	224	230
4. 2016	XXX	XXX	20	38	76	138	171	183	205	213
5. 2017	XXX	XXX	XXX	27	53	108	152	189	219	231
6. 2018	XXX	XXX	XXX	XXX	19	50	84	118	166	199
7. 2019	XXX	XXX	XXX	XXX	XXX	17	46	67	104	151
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	16	34	52	74
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	35	56
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21	49
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	1,907	1,852	1,824	1,800	1,795	0	1,781	1,779	1,780	1,781
2. 2014	105	87	90	52	19	(1)	9	4	2	3
3. 2015	XXX	71	90	110	72	3	24	6	7	3
4. 2016	XXX	XXX	75	97	90	(4)	58	16	18	7
5. 2017	XXX	XXX	XXX	70	85	(1)	97	36	19	11
6. 2018	XXX	XXX	XXX	XXX	55	3	118	68	35	17
7. 2019	XXX	XXX	XXX	XXX	XXX	3	75	64	58	19
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	35	33	40	27
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	74	43	28
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	98	39
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	143	48	31	29	26	(3)	9	7	6	7
2. 2014	176	247	319	352	384	392	413	412	418	426
3. 2015	XXX	120	217	307	350	375	422	427	440	446
4. 2016	XXX	XXX	114	194	272	273	386	373	411	414
5. 2017	XXX	XXX	XXX	124	196	189	374	378	426	434
6. 2018	XXX	XXX	XXX	XXX	98	96	267	282	340	371
7. 2019	XXX	XXX	XXX	XXX	XXX	46	182	213	277	302
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	70	100	140	164
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	102	149	174
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	153	196
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	103

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	189	108	57	22	15	1	2	1	0	1
2. 2014	17	114	183	213	224	232	234	236	236	236
3. 2015	XXX	42	142	195	205	215	217	217	218	218
4. 2016	XXX	XXX	40	128	167	188	190	192	193	193
5. 2017	XXX	XXX	XXX	46	130	169	178	184	190	191
6. 2018	XXX	XXX	XXX	XXX	53	173	217	233	244	247
7. 2019	XXX	XXX	XXX	XXX	XXX	62	194	246	265	272
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	103	191	238	256
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	67	156	211
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	152
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	714	645	618	605	598	1	597	597	597	598
2. 2014	65	83	26	11	8	(1)	1	0	0	0
3. 2015	XXX	96	56	12	6	1	1	1	0	0
4. 2016	XXX	XXX	86	57	22	1	0	1	0	1
5. 2017	XXX	XXX	XXX	94	52	(1)	1	4	1	0
6. 2018	XXX	XXX	XXX	XXX	101	(8)	28	8	3	1
7. 2019	XXX	XXX	XXX	XXX	XXX	(3)	66	22	7	2
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	128	54	16	6
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	94	67	21
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	110	59
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	105

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	202	115	57	14	12	5	2	1	1	2
2. 2014	101	271	322	346	361	361	365	366	366	366
3. 2015	XXX	160	269	297	311	320	322	323	323	323
4. 2016	XXX	XXX	142	244	268	279	283	286	288	289
5. 2017	XXX	XXX	XXX	149	234	238	254	266	272	274
6. 2018	XXX	XXX	XXX	XXX	173	220	315	321	327	329
7. 2019	XXX	XXX	XXX	XXX	XXX	74	298	326	338	344
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	248	307	334	350
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	174	281	314
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	170	276
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	146

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	16	31	28	21	12	5	1	0	1	0
2. 2014	0	1	1	1	1	3	3	3	3	4
3. 2015	XXX	0	1	1	1	1	1	1	1	1
4. 2016	XXX	XXX	2	3	5	6	6	6	6	6
5. 2017	XXX	XXX	XXX	1	5	5	5	6	6	7
6. 2018	XXX	XXX	XXX	XXX	2	2	3	4	5	5
7. 2019	XXX	XXX	XXX	XXX	XXX	1	4	7	7	7
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	2	4	4	4
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	2	3
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	5
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	67	71	57	44	39	(1)	37	37	35	35
2. 2014	1	1	0	4	0	(1)	0	0	1	0
3. 2015	XXX	1	0	0	0	0	0	0	0	0
4. 2016	XXX	XXX	4	2	0	0	0	0	0	0
5. 2017	XXX	XXX	XXX	4	0	0	2	0	0	1
6. 2018	XXX	XXX	XXX	XXX	1	0	1	1	2	0
7. 2019	XXX	XXX	XXX	XXX	XXX	0	3	0	0	0
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	2	0	1	3
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3	2
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	4
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	36	36	6	3	5	1	1	0	0	0
2. 2014	1	4	4	9	7	9	10	10	11	11
3. 2015	XXX	1	2	2	2	2	2	2	2	2
4. 2016	XXX	XXX	6	6	7	9	9	9	9	9
5. 2017	XXX	XXX	XXX	6	7	7	9	8	8	10
6. 2018	XXX	XXX	XXX	XXX	3	2	4	5	7	6
7. 2019	XXX	XXX	XXX	XXX	XXX	2	9	9	9	9
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	5	5	7	9
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	6	7
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	21
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 5R - PRODUCTS LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	0	2	1	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	0	1	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	0	2	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

**SCHEDULE P - PART 5T - WARRANTY
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	XXX	XXX	XX	XXX	XXX	XX	IX			
2. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	XXX	XXX	XX	XX	XX	XX	XX			
2. 2022	XXX	XXX	XX	XX	XX	XX	XXX	XXX		
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	XXX	XXX	XX	XXX	XXX	XX	IX			
2. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	36,525	36,525	36,525	36,525	36,525	36,525	36,525	36,525	36,525	36,525	36,525
3. 2015.....	XXX	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527
4. 2016.....	XXX	XXX	37,062	37,062	37,062	37,062	37,062	37,062	37,062	37,062	37,062
5. 2017.....	XXX	XXX	XXX	40,889	40,889	40,889	40,889	40,889	40,889	40,889	40,889
6. 2018.....	XXX	XXX	XXX	XXX	38,830	38,830	38,830	38,830	38,830	38,830	38,830
7. 2019.....	XXX	XXX	XXX	XXX	XXX	44,395	44,395	44,395	44,395	44,395	44,395
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	44,124	44,124	44,124	44,124	44,124
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52,725	52,725	52,725	52,725
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45,935	45,935	45,935
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,211	27,211
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,211
13. Earned Premiums (Sch P-Pt. 1)	36,525	34,527	37,062	40,889	38,830	44,395	44,124	52,725	45,935	27,211	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	36,525	36,525	36,525	36,525	36,525	36,525	36,525	36,525	36,525	36,525	36,525
3. 2015.....	XXX	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527
4. 2016.....	XXX	XXX	37,062	37,062	37,062	37,062	37,062	37,062	37,062	37,062	37,062
5. 2017.....	XXX	XXX	XXX	40,889	40,889	40,889	40,889	40,889	40,889	40,889	40,889
6. 2018.....	XXX	XXX	XXX	XXX	38,830	38,830	38,830	38,830	38,830	38,830	38,830
7. 2019.....	XXX	XXX	XXX	XXX	XXX	44,395	44,395	44,395	44,395	44,395	44,395
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	44,124	44,124	44,124	44,124	44,124
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52,725	52,725	52,725	52,725
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45,935	45,935	45,935
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,211	27,211
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,211
13. Earned Premiums (Sch P-Pt. 1)	36,525	34,527	37,062	40,889	38,830	44,395	44,124	52,725	45,935	27,211	XXX

SCHEDULE P - PART 6D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	89	89	89	89	89	89	89
7. 2019.....	XXX	XXX	XXX	XXX	XXX	132	132	132	132	132	132
8. 2020.....	XXX	XXX	XXX	XXX	XXX	9	9	9	9	9	9
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(1)	(1)	(1)	(1)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	89	132	9	(1)	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	89	89	89	89	89	89	89
7. 2019.....	XXX	XXX	XXX	XXX	XXX	132	132	132	132	132	132
8. 2020.....	XXX	XXX	XXX	XXX	XXX	9	9	9	9	9	9
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(1)	(1)	(1)	(1)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	89	132	9	(1)	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	12,880	12,880	12,880	12,880	12,880	12,880	12,880	12,880	12,880	12,880	12,880
3. 2015.....	XXX	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808
4. 2016.....	XXX	XXX	16,069	16,069	16,069	16,069	16,069	16,069	16,069	16,069	16,069
5. 2017.....	XXX	XXX	XXX	16,405	16,405	16,405	16,405	16,405	16,405	16,405	16,405
6. 2018.....	XXX	XXX	XXX	XXX	17,047	17,047	17,047	17,047	17,047	17,047	17,047
7. 2019.....	XXX	XXX	XXX	XXX	XXX	18,676	18,676	18,676	18,676	18,676	18,676
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	17,698	17,698	17,698	17,698	17,698
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,517	15,517	15,517	15,517
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,938	16,938	16,938
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,557	16,557
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,557
13. Earned Premiums (Sch P-Pt. 1)	12,880	14,808	16,069	16,405	17,047	18,676	17,698	15,517	16,938	16,557	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	12,880	12,880	12,880	12,880	12,880	12,880	12,880	12,880	12,880	12,880	12,880
3. 2015.....	XXX	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808
4. 2016.....	XXX	XXX	16,069	16,069	16,069	16,069	16,069	16,069	16,069	16,069	16,069
5. 2017.....	XXX	XXX	XXX	16,405	16,405	16,405	16,405	16,405	16,405	16,405	16,405
6. 2018.....	XXX	XXX	XXX	XXX	17,047	17,047	17,047	17,047	17,047	17,047	17,047
7. 2019.....	XXX	XXX	XXX	XXX	XXX	18,676	18,676	18,676	18,676	18,676	18,676
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	17,698	17,698	17,698	17,698	17,698
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,517	15,517	15,517	15,517
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,938	16,938	16,938
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,557	16,557
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,557
13. Earned Premiums (Sch P-Pt. 1)	12,880	14,808	16,069	16,405	17,047	18,676	17,698	15,517	16,938	16,557	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	47,389	47,389	47,389	47,389	47,389	47,389	47,389	47,389	47,389	47,389	47,389
3. 2015.....	XXX	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469
4. 2016.....	XXX	XXX	69,060	69,060	69,060	69,060	69,060	69,060	69,060	69,060	69,060
5. 2017.....	XXX	XXX	XXX	60,603	60,603	60,603	60,603	60,603	60,603	60,603	60,603
6. 2018.....	XXX	XXX	XXX	XXX	50,719	50,719	50,719	50,719	50,719	50,719	50,719
7. 2019.....	XXX	XXX	XXX	XXX	XXX	46,796	46,796	46,796	46,796	46,796	46,796
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	40,404	40,404	40,404	40,404	40,404
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29,495	29,495	29,495	29,495
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,642	23,642	23,642
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,991	22,991
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,991
13. Earned Premiums (Sch P-Pt. 1)	47,389	54,469	69,060	60,603	50,719	46,796	40,404	29,495	23,642	22,991	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	47,389	47,389	47,389	47,389	47,389	47,389	47,389	47,389	47,389	47,389	47,389
3. 2015.....	XXX	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469
4. 2016.....	XXX	XXX	69,060	69,060	69,060	69,060	69,060	69,060	69,060	69,060	69,060
5. 2017.....	XXX	XXX	XXX	60,603	60,603	60,603	60,603	60,603	60,603	60,603	60,603
6. 2018.....	XXX	XXX	XXX	XXX	50,719	50,719	50,719	50,719	50,719	50,719	50,719
7. 2019.....	XXX	XXX	XXX	XXX	XXX	46,796	46,796	46,796	46,796	46,796	46,796
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	40,404	40,404	40,404	40,404	40,404
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29,495	29,495	29,495	29,495
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,642	23,642	23,642
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,991	22,991
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,991
13. Earned Premiums (Sch P-Pt. 1)	47,389	54,469	69,060	60,603	50,719	46,796	40,404	29,495	23,642	22,991	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	100,299	100,299	100,299	100,299	100,299	100,299	100,299	100,299	100,299	100,299	100,299
3. 2015.....	XXX	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988
4. 2016.....	XXX	XXX	115,523	115,523	115,523	115,523	115,523	115,523	115,523	115,523	115,523
5. 2017.....	XXX	XXX	XXX	116,744	116,744	116,744	116,744	116,744	116,744	116,744	116,744
6. 2018.....	XXX	XXX	XXX	XXX	118,601	118,601	118,601	118,601	118,601	118,601	118,601
7. 2019.....	XXX	XXX	XXX	XXX	XXX	116,367	116,367	116,367	116,367	116,367	116,367
8. 2020.....	XXX	XXX	XXX	XXX	XXX	129,165	129,165	129,165	129,165	129,165	129,165
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	169,374	169,374	169,374	169,374	169,374
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	200,514	200,514	200,514	200,514
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	195,299	195,299
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	195,299
13. Earned Premiums (Sch P-Pt. 1)	100,299	108,988	115,523	116,744	118,601	116,367	129,165	169,374	200,514	195,299	XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	100,299	100,299	100,299	100,299	100,299	100,299	100,299	100,299	100,299	100,299	100,299
3. 2015.....	XXX	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988
4. 2016.....	XXX	XXX	115,523	115,523	115,523	115,523	115,523	115,523	115,523	115,523	115,523
5. 2017.....	XXX	XXX	XXX	116,744	116,744	116,744	116,744	116,744	116,744	116,744	116,744
6. 2018.....	XXX	XXX	XXX	XXX	118,601	118,601	118,601	118,601	118,601	118,601	118,601
7. 2019.....	XXX	XXX	XXX	XXX	XXX	116,367	116,367	116,367	116,367	116,367	116,367
8. 2020.....	XXX	XXX	XXX	XXX	XXX	129,165	129,165	129,165	129,165	129,165	129,165
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	169,374	169,374	169,374	169,374	169,374
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	200,514	200,514	200,514	200,514
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	195,299	195,299	195,299
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	195,299
13. Earned Premiums (Sch P-Pt. 1)	100,299	108,988	115,523	116,744	118,601	116,367	129,165	169,374	200,514	195,299	XXX

SCHEDULE P - PART 6M - INTERNATIONAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX									
11. 2023.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX									
11. 2023.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 6N - REINSURANCE - NONPROPORTIONAL ASSUMED PROPERTY
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX	X								
6. 2018.....	XXX	XXX	X	X							
7. 2019.....	XXX	XXX	X	X	X						
8. 2020.....	XXX	XXX	X	X	X	X					
9. 2021.....	XXX	XXX	X	X	X	X	X				
10. 2022.....	XXX	XXX	X	X	X	X	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX	X								
6. 2018.....	XXX	XXX	X	X							
7. 2019.....	XXX	XXX	X	X	X						
8. 2020.....	XXX	XXX	X	X	X	X					
9. 2021.....	XXX	XXX	X	X	X	X	X				
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SCHEDULE P - PART 6O - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX	X								
6. 2018.....	XXX	XXX	X	X							
7. 2019.....	XXX	XXX	X	X	X						
8. 2020.....	XXX	XXX	X	X	X	X					
9. 2021.....	XXX	XXX	X	X	X	X	X				
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX	X								
6. 2018.....	XXX	XXX	X	X							
7. 2019.....	XXX	XXX	X	X	X						
8. 2020.....	XXX	XXX	X	X	X	X					
9. 2021.....	XXX	XXX	X	X	X	X	X				
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	396	396	396	396	396	396	396	396	396	396	396
3. 2015.....	XXX	347	347	347	347	347	347	347	347	347	347
4. 2016.....	XXX	XXX	1,122	1,122	1,122	1,122	1,122	1,122	1,122	1,122	1,122
5. 2017.....	XXX	XXX	XXX	704	704	704	704	704	704	704	704
6. 2018.....	XXX	XXX	XXX	XXX	189	189	189	189	189	189	189
7. 2019.....	XXX	XXX	XXX	XXX	XXX	192	192	192	192	192	192
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	228	228	228	228	228
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	529	529	529	529
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,249	1,249	1,249
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,106	1,106
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,106
13. Earned Premiums (Sch P-Pt. 1)	396	347	1,122	704	189	192	228	529	1,249	1,106	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	396	396	396	396	396	396	396	396	396	396	396
3. 2015.....	XXX	347	347	347	347	347	347	347	347	347	347
4. 2016.....	XXX	XXX	1,122	1,122	1,122	1,122	1,122	1,122	1,122	1,122	1,122
5. 2017.....	XXX	XXX	XXX	704	704	704	704	704	704	704	704
6. 2018.....	XXX	XXX	XXX	XXX	189	189	189	189	189	189	189
7. 2019.....	XXX	XXX	XXX	XXX	XXX	192	192	192	192	192	192
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	228	228	228	228	228
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	529	529	529	529
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,249	1,249	1,249
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,106	1,106
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,106
13. Earned Premiums (Sch P-Pt. 1)	396	347	1,122	704	189	192	228	529	1,249	1,106	XXX

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	7	7	7	7	7
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	351	351	351	351
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	483	483	483
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	409	409	409
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	409
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	7	351	483	409	XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	7	7	7	7	7
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	351	351	351	351
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	483	483	483
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	409	409	409
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	409
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	7	351	483	409	XXX

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? \$

1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No []

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No []

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A []

1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior		
1.602 2014		
1.603 2015		
1.604 2016		
1.605 2017		
1.606 2018		
1.607 2019		
1.608 2020		
1.609 2021		
1.610 2022		
1.611 2023		
1.612 Totals	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for:
 (in thousands of dollars)

5.1 Fidelity
5.2 Surety

6. Claim count information is reported per claim or per claimant (Indicate which). per claim.....
 If not the same in all years, explain in Interrogatory 7.

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]

7.2 (An extended statement may be attached.)

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

Allocated by States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- ciliary Loca- tion	10 Rela- tion- ship to Report- ing Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Per- cen- tage	14 Ultimate Controlling Entity(es)/Person(s)	15 Is an SCA Filing Re- quired? (Yes/No)	16 *
.0140	Nationwide .....	.....	31-1486309	.....	.....	10 W. Nationwide, LLC .....	.. OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	100 Green Meadows Drive, LLC .....	.. OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	1000 Yard Street, LLC .....	.. OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	1015 Long Street, LLC .....	.. OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	1050 Yard Street, LLC .....	.. OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	1125 Rail Street, LLC .....	.. OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1733036	.....	.....	120 Acre Partners, LLC .....	.. DE....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	.95.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	1
.0140	Nationwide .....	.....	20-4939866	.....	.....	125 Yard Street, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939867	.....	.....	1175 Bobcat, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	26-2451988	.....	.....	1492 Capital, LLC .....	.. OH....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	111 Rivulon Boulevard, LLC .....	.. OH....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	155 Rivulon Boulevard, LLC .....	.. OH....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	161 Rivulon Boulevard, LLC .....	.. OH....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1580283	.....	.....	170 Marconi, LLC .....	.. OH....	NIA.....	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	38-4118665	.....	.....	220 Vine St., LLC .....	.. OH....	NIA.....	NID HP, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1580283	.....	.....	245 Parks Edge Place, LLC .....	.. OH....	NIA.....	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	275 Rivulon Boulevard, LLC .....	.. OH....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	300 Rivulon Boulevard, LLC .....	.. OH....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	310 Rivulon Boulevard, LLC .....	.. OH....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	343 N. Front, LLC .....	.. OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	400 Rivulon Boulevard, LLC .....	.. OH....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1580283	.....	.....	400 West Nationwide Boulevard, LLC .....	.. OH....	NIA.....	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	410 Rivulon Boulevard, LLC .....	.. OH....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1580283	.....	.....	425 West Nationwide Boulevard, LLC .....	.. OH....	NIA.....	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	44 Chestnut, LLC .....	.. OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	38-4118665	.....	.....	500 Neil Avenue, LLC .....	.. OH....	NIA.....	NID HP, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	38-4118665	.....	.....	515 Kilbourne Street, LLC .....	.. OH....	NIA.....	NID HP, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	87-1954007	.....	.....	525 Cleveland Avenue, LLC .....	.. OH....	NIA.....	Nationwide Financial Services, Inc.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	31-1486309	.....	.....	75 Rivulon Boulevard, LLC .....	.. OH....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	775 Yard Street, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	777 Swan Street, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	780 Yard Street, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	795 Rail Street, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	800 Bobcat Avenue, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	800 Goodale Boulevard, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	800 Yard Street, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	805 Bobcat Avenue, LLC .....	.. OH....	NIA.....	GYY Residential, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	808 Yard Street, LLC .....	.. OH....	NIA.....	GYY Residential, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	820 Goodale Boulevard, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	822 Williams Avenue, LLC .....	.. OH....	NIA.....	GYY Residential, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	825 Junction Way, LLC .....	.. OH....	NIA.....	GYY Residential, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	828 Bobcat Avenue, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	840 Third Avenue, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	840 Yard Street, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	845 Yard Street, LLC .....	.. OH....	NIA.....	GYY Residential, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	855 Third Avenue, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	860 Third Avenue, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	875 First Avenue, LLC .....	.. OH....	NIA.....	GYY Residential, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	
.0140	Nationwide .....	.....	20-4939866	.....	.....	880 Third Avenue, LLC .....	.. OH....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Per-centage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0140	Nationwide		20-4939866			880 Yard Street, LLC .....	.. OH.... NIA.....	GVY Residential, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		20-4939866			895 W. Third Avenue, LLC .....	.. OH.... NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		20-4939866			950 Dorchester Way, LLC .....	.. OH.... NIA.....	GVY Residential, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		20-4939866			950 Goodale Boulevard, LLC .....	.. OH.... NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1486309			960 Bobcat Avenue, LLC .....	.. OH.... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1486309			975 Rail Street, LLC .....	.. OH.... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1486309			995 Yard Street, LLC .....	.. OH.... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1486309			18615 Claret Drive, LLC .....	.. OH.... NIA.....	NRI Cavasson, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1486309			18665 Claret Drive, LLC .....	.. OH.... NIA.....	NRI Cavasson, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1486309			18700 Hayden Road, LLC .....	.. OH.... NIA.....	NRI Cavasson, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1486309			18750 Hayden Road, LLC .....	.. OH.... NIA.....	NRI Cavasson, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1580283			AD DORA, LLC .....	.. OH.... NIA.....	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1580283			ADTV, LLC .....	.. OH.... NIA.....	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide	10127	27-0114983			ALLIED Insurance Company of America .....	.. OH.... IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
						ALLIED Property and Casualty Insurance Company .....	.. IA.... IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide	42579	42-1201931			AMCO Insurance Company .....	.. TX.... IA.....	AMCO Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		42-1527863			AMCO Insurance Company .....	.. IA.... IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide	19100	42-6054959			American Marine Underwriters, Inc. .....	.. FL.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		59-1031596			American Tax Credit Fund 2017-A, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		81-4532504			American Tax Credit Fund 2017-B, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		82-2001573			American Tax Credit Fund 2018-A, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		82-4591498			American Tax Credit Fund 2018-B, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		83-0606592			American Tax Credit Fund 2018-C, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		83-0620232			American Tax Credit Fund 2019-A, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		83-3900932			American Tax Credit Fund 2019-B, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		83-3953721			American Tax Credit Fund 2020-A, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		84-3443067			American Tax Credit Fund 2020-B, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		85-2359702			American Tax Credit Fund 2021-A, LLC (fka American Tax Credit Fund 2020-B, LLC) .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		85-2649655			American Tax Credit Fund 2021-B, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		86-2502912			American Tax Credit Fund 2021-C, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		87-1349942			American Tax Credit Fund 2023-B, LLC (fka American Tax Credit Fund 2022-A, LLC) .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		87-4753681			American Tax Credit Fund 2023-C, LLC (fka American Tax Credit Fund 2022-B, LLC) .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		87-4771309			American Tax Credit Fund 2023-A, LLC .....	.. OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		92-1389304			Arena District CA I, LLC .....	.. OH.... NIA.....	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1580283			Arena District Owners Association .....	.. OH.... OTH.....	Other non-Nationwide	n/a		Other non-Nationwide .....	... NO.....	2	
.0140	Nationwide		90-0280710			Cavasson Hotel, LLC .....	.. OH.... NIA.....	Cavasson Hotel Holdings, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1486309			Cavasson Hotel Holdings, LLC .....	.. OH.... NIA.....	NRI Cavasson, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		20-1618232			CNRI-Cannonsport Condominium, LLC .....	.. OH.... NIA.....	CNRI-Cannonsport, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		20-1618232			CNRI-Cannonsport, LLC .....	.. OH.... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide	29262	74-1061659			Colonial County Mutual Insurance Company .....	.. TX.... IA.....	Other non-Nationwide	contract		Other non-Nationwide .....	... NO.....	2	
.0140	Nationwide	18961	68-0066866			Crestbrook Insurance Company .....	.. OH.... IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		31-1486309			Crewville, Ltd. .....	.. OH.... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		84-5052608			Danforth, LLC .....	.. OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
.0140	Nationwide		42587	42-1207150		Depositors Insurance Company .....	.. IA.... IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO.....		
			46-4104813			Discover Affordable Housing Investment Fund I LLC .....	.. OH.... OTH.....	Other non-Nationwide	n/a	0.000 ...	Other non-Nationwide .....	... NO.....	2	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
.0140	Nationwide		33-0096671			DVM Insurance Agency .....	..CA.... NIA.....	Veterinary Pet Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	15821	47-4523959			Eagle Captive Reinsurance, LLC .....	..OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		26-3260559			E-Risk Services, L.L.C. .....	..DE.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	22209	75-6013587			Freedom Specialty Insurance Company .....	..OH.... NIA.....	Scottsdale Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		20-4939866			Grandview Yard Hotel Holdings, LLC .....	..OH.... NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		20-4939866			Grandview Yard Hotel, LLC .....	..OH.... NIA.....	Grandview Yard Hotel Holdings, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		20-4939866			GVY Residential, LLC .....	..OH.... NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	23582	41-0417250			Harleysville Insurance Company .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
						Harleysville Insurance Company of New Jersey .....	..NJ.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	42900	23-2253669			Harleysville Insurance Company of New York .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	10674	23-2864924			Harleysville Lake States Insurance Company .....	..MI.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	14516	38-3198542			Harleysville Preferred Insurance Company .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	35696	23-2384978			Harleysville Worcester Insurance Company .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	26182	04-1989660			Jefferson National Life Insurance Company .....	..TX.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	64017	75-0300900			Jefferson National Life Insurance Company of New York .....	..NY.... NIA.....	Jefferson National Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	15727	47-1180302			Jerome Village Company, LLC .....	..OH.... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		31-1486309			Lone Star General Agency, Inc. .....	..TX.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		74-1395229			National Casualty Company .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	11991	38-0865250			National Casualty Company of America, Ltd. .....	..GBR.... NIA.....	National Casualty Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		42-1154244			Nationwide Advantage Mortgage Company .....	..IA.... NIA.....	AMCO Insurance Company	Ownership.....	87.300 ...	Nationwide Mutual Insurance Company .....	...YES.....1		
						ALLIED Property & Casualty Insurance Company .....	..IA.... NIA.....	AMCO Insurance Company	Ownership.....	8.470 ...	Nationwide Mutual Insurance Company .....	...YES.....1		
.0140	Nationwide		42-1154244			Nationwide Advantage Mortgage Company .....	..IA.... NIA.....	Depositors Insurance Company	Ownership.....	4.230 ...	Nationwide Mutual Insurance Company .....	...YES.....1		
.0140	Nationwide		26093	48-0470690		Nationwide Affinity Insurance Company of America .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
						Nationwide Agent Risk Purchasing Group, Inc. (fka On Your Side Nationwide Insurance Agency, Inc.) .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		47-1923444			Nationwide Agribusiness Insurance Company .....	..IA.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	28223	42-1015537			Nationwide Arena, LLC .....	..OH.... NIA.....	NRI Arena, LLC	Ownership.....	90.00 ...	Nationwide Mutual Insurance Company .....	...NO.....1		
.0140	Nationwide		31-1578869			Nationwide Asset Management, LLC .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		20-8670712			Nationwide Assurance Company .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	10723	95-0639970			Nationwide Cash Management Company .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		31-1036287			Nationwide Corporation .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...YES.....1		
.0140	Nationwide		31-4416546			Nationwide Financial Assignment Company .....	..OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		31-1667326			Nationwide Financial General Agency, Inc. .....	..PA.... NIA.....	NFS Distributors, Inc.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		23-2412039			Nationwide Financial Services Capital Trust .....	..DE.... NIA.....	Nationwide Financial Services, Inc.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		31-6554353			Nationwide Financial Services, Inc. .....	..DE.... NIA.....	Nationwide Corporation	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		31-1486870			Nationwide Fund Advisors .....	..DE.... NIA.....	Nationwide Financial Services, Inc.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		52-6969857			Nationwide Fund Distributors LLC .....	..DE.... NIA.....	NFS Distributors, Inc.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		31-1748721			Nationwide Fund Management LLC .....	..DE.... NIA.....	NFS Distributors, Inc.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		31-0900518			Nationwide General Insurance Company .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	23760	31-4425763			Nationwide Indemnity Company .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	10070	31-1399201			Nationwide Insurance Company of America .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	25453	95-2130882			Nationwide Insurance Company of Florida .....	..OH.... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide	10948	31-1613686			Nationwide Investment Advisors, LLC .....	..OH.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...NO.....		
.0140	Nationwide		41-2206199			Nationwide Investment Services Corporation .....	..OK.... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	...YES.....		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percent-age	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
.0140	Nationwide	92657	31-1000740				Nationwide Life and Annuity Insurance Company	.OH.	.IA.	Nationwide Life Insurance Company	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide	66869	31-4156830				Nationwide Life Insurance Company	.OH.	.IA.	Nationwide Financial Services, Inc.	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		13-4212969				Nationwide Life Tax Credit Partners 2002-A, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		01-0749754				Nationwide Life Tax Credit Partners 2002-B, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		54-2113175				Nationwide Life Tax Credit Partners 2003-A, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		58-2672725				Nationwide Life Tax Credit Partners 2003-B, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		20-0382144				Nationwide Life Tax Credit Partners 2004-A, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		20-0745965				Nationwide Life Tax Credit Partners 2004-C, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		20-1918935				Nationwide Life Tax Credit Partners 2004-F, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		20-2303694				Nationwide Life Tax Credit Partners 2005-A, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		20-2303602				Nationwide Life Tax Credit Partners 2005-B, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		20-2774223				Nationwide Life Tax Credit Partners 2005-E, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		27-1362364				Nationwide Life Tax Credit Partners 2009-I, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		45-0469525				Nationwide Life Tax Credit Partners No. 1, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide	42110	75-1780981				Nationwide Lloyds	.TX.	.IA.	n/a	contract		Nationwide Mutual Insurance Company	NO	2
.0140	Nationwide		42-1373380				Nationwide Sales Solutions, Inc. (fka Nationwide Member Solutions Agency Inc.)	.IA.	.NIA.	Nationwide Mutual Insurance Company	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		75-3191025				Nationwide Mutual Capital, LLC	.OH.	.NIA.	Nationwide Mutual Insurance Company	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		23787	31-4177100			Nationwide Mutual Insurance Company	.OH.	.UDP.	Other non-Nationwide	n/a		Other non-Nationwide	NO	2
.0140	Nationwide		34-2012765				Nationwide Private Equity Fund, LLC	.OH.	.NIA.	Nationwide Mutual Insurance Company	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		37877	31-0970750			Nationwide Property and Casualty Insurance Company	.OH.	.IA.	Nationwide Mutual Insurance Company	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1486309				Nationwide Realty Investors, Ltd.	.OH.	.NIA.	Nationwide Mutual Insurance Company	Ownership.	.97.000	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		31-1486309				Nationwide Realty Investors, Ltd.	.OH.	.NIA.	Nationwide Indemnity Company	Ownership.	.3.000	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		31-1486309				Nationwide Realty Management, LLC	.OH.	.NIA.	Nationwide Realty Investors, Ltd.	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		73-0948330				Nationwide Realty Services, Ltd.	.OH.	.NIA.	Nationwide Mutual Insurance Company	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		83-2250056				Nationwide Retirement Solutions, Inc.	.DE.	.NIA.	NFS Distributors, Inc.	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		36-2434406				Nationwide Life and Annuity Insurance								
.0140	Nationwide		46-1952215				Nationwide SBL, LLC	.OH.	.NIA.	Company	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		46-1971926				Nationwide Securities, LLC	.OH.	.NIA.	NFS Distributors, Inc.	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1592130	2729677			Nationwide Tax Credit Partners 2013-A, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		20-5976272				Nationwide Tax Credit Partners 2013-B, LLC	.OH.	.NIA.	Nationwide Life Insurance Company	Other.	.0.010	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		31-0871532				Nationwide Trust Company, FSB	.US.	.OTH.	Nationwide Financial Services, Inc.	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	2
.0140	Nationwide		85-4193218				Nationwide Ventures, LLC	.OH.	.NIA.	Nationwide Mutual Insurance Company	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		11-3651828				NBS Insurance Agency, Inc.	.OH.	.IA.	Nationwide Mutual Insurance Company	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1630871				NCS Arizona, LLC	.OH.	.NIA.	Nationwide Mutual Insurance Company	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide						ND La Quinta Partners, LLC	.DE.	.NIA.	Nationwide Realty Investors, Ltd.	Ownership.	.95.000	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide						NFS Distributors, Inc.	.DE.	.NIA.	Nationwide Financial Services, Inc.	Ownership.	.100.000	Nationwide Mutual Insurance Company	NO	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0140	Nationwide		93-4557312				NLAIC REO Holdings, LLC .....	.OH...	.NIA...	Nationwide Life and Annuity Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		82-5195340				NLIC REO Holdings, LLC .....	.OH...	.NIA...	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		82-5194959				NMIC REO Holdings, LLC .....	.OH...	.NIA...	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		46-3762545				NNOV8, LLC .....	.OH...	.NIA...	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		20-4939866				North of Third, LLC .....	.OH...	.NIA...	NRI Equity Land Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1486309				NRI Arena, LLC .....	.OH...	.NIA...	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1486309				NRI Brookedge, LLC .....	.OH...	.NIA...	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1486309				NRI Builders, LLC .....	.OH...	.NIA...	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1486309				NRI Cavasson, LLC .....	.OH...	.NIA...	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1486309				NRI Corporate Housing, LLC .....	.OH...	.NIA...	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1486309				NRI Cramer Creek, LLC .....	.OH...	.NIA...	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		20-4939866				NRI Equity Land Investments, LLC .....	.OH...	.NIA...	Nationwide Realty Investors, Ltd.	Ownership.....	.80.00 ...	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		26-0212217				NRI Equity Tampa, LLC .....	.OH...	.NIA...	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1486309				NRI Office Ventures, Ltd .....	.OH...	.NIA...	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1580283				NRI Telecom, LLC .....	.OH...	.NIA...	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1486309				NRI-Rivulon, LLC .....	.OH...	.NIA...	Nationwide Realty Investors, Ltd.	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		90-0729552				NTCIF-2011, LLC .....	.OH...	.NIA...	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	1
.0140	Nationwide		27-4700627				NTCP 2011-A, LLC .....	.OH...	.OTH...	Nationwide Life Insurance Company	Other.....	.010 ...	Nationwide Mutual Insurance Company	NO	2
.0140	Nationwide		46-0741029				NTCP 2012-A, LLC .....	.OH...	.OTH...	Nationwide Life Insurance Company	Other.....	.010 ...	Nationwide Mutual Insurance Company	NO	2
.0140	Nationwide		46-3309896				NTCP 2013-C, LLC .....	.OH...	.OTH...	Nationwide Life Insurance Company	Other.....	.010 ...	Nationwide Mutual Insurance Company	NO	2
.0140	Nationwide		46-4111078				NTCP 2014-A, LLC .....	.OH...	.OTH...	Nationwide Life Insurance Company	Other.....	.010 ...	Nationwide Mutual Insurance Company	NO	2
.0140	Nationwide		47-1404116				NTCP 2014-B, LLC .....	.OH...	.OTH...	Nationwide Life Insurance Company	Other.....	.010 ...	Nationwide Mutual Insurance Company	NO	2
.0140	Nationwide		47-1413242				NTCP 2014-C, LLC .....	.OH...	.OTH...	Nationwide Life Insurance Company	Other.....	.010 ...	Nationwide Mutual Insurance Company	NO	2
.0140	Nationwide		47-3909345				NTCP 2015-A, LLC .....	.OH...	.OTH...	Nationwide Life Insurance Company	Other.....	.010 ...	Nationwide Mutual Insurance Company	NO	2
.0140	Nationwide		47-4148470				NTCP 2015-B, LLC .....	.OH...	.OTH...	Nationwide Life Insurance Company	Other.....	.010 ...	Nationwide Mutual Insurance Company	NO	2
.0140	Nationwide		81-3836925				NTCP 2016-A, LLC .....	.OH...	.NIA...	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		82-2015065				NTCP 2017-A, LLC .....	.OH...	.NIA...	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		84-1969518				NW Fyrebird, LLC .....	.OH...	.NIA...	NNOV8, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		85-3363961				NW Next, LLC .....	.OH...	.NIA...	NNOV8, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		81-0936428				NW Private Debt, LLC .....	.OH...	.NIA...	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		26-1903919				NW REI, LLC .....	.DE...	.NIA...	Nationwide Mutual Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		92-1294202				NW-Adams, LLC .....	.OH...	.NIA...	NW REI, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		92-2674633				NW-Brandon LLC .....	.OH...	.NIA...	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		87-0847675				NW-Broadway at Surf, LLC .....	.OH...	.NIA...	NMIC REO Holdings, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		88-2152576				NW-Colfax, LLC .....	.OH...	.NIA...	NW REI (NLAIC), LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		92-0292630				NW-Conroe, LLC .....	.OH...	.NIA...	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		87-3648595				NW-Corazon, LLC .....	.OH...	.NIA...	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		86-3529884				NW-Englewood, LLC .....	.OH...	.NIA...	NW REI (NLIC), LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		84-4388876				NW-Escalante, LLC .....	.OH...	.NIA...	NW REI, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		86-1538532				NW-Escalante II, LLC .....	.OH...	.NIA...	NW REI, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		92-3310596				NW-FSU, LLC .....	.OH...	.NIA...	Nationwide Life Insurance Company	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1580283				NW-205 Vine, LLC .....	.OH...	.NIA...	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1580283				NID 225 Nationwide, LLC .....	.OH...	.NIA...	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1580283				NID 230 West, LLC .....	.OH...	.NIA...	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1580283				NID 240 Nationwide, LLC .....	.OH...	.NIA...	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1580283				NID 250 Brodbelt, LLC .....	.OH...	.NIA...	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1580283				NID 250 West, LLC .....	.OH...	.NIA...	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	
.0140	Nationwide		31-1580283				NID 265 Neil, LLCOH...	.NIA...	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company	NO	

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.0140	Nationwide		31-1580283			NID 275 Marconi, LLC OH.... NIA....	NID Investments, LLC	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company NO		
.0140	Nationwide		31-1580283			NID 300 Neil, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID 300 Spring, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID 355 McConnell, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID 425 Nationwide, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID 500 Nationwide, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID Arena Crossing, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID Arena District I, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID Arena District II, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID Arena District MM, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID Arena District PW, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID Arena District V, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID Athletic Club, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		88-2975730			NW-Boise, LLC .....	.. OH.... NIA....	Nationwide Life Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-1580283			NID Brodbeck, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		30-0876022			NID Franklinton, LLC .....	.. OH.... NIA....	Nationwide Realty Investors, Ltd. .....	.....	Ownership.....	.80.00 ...	Nationwide Mutual Insurance Company .....	... NO	1
.0140	Nationwide		31-4118663			NID HP, LLC .....	.. OH.... NIA....	NID Investments, LLC .....	.....	Ownership.....	.75.00 ...	Nationwide Mutual Insurance Company .....	... NO	1
.0140	Nationwide		31-1580283			NID Investments, LLC .....	.. OH.... NIA....	Nationwide Realty Investors, Ltd. .....	.....	Ownership.....	.80.00 ...	Nationwide Mutual Insurance Company .....	... NO	1
.0140	Nationwide		31-1486309			NIGH, LLC .....	.. OH.... NIA....	Nationwide Realty Investors, Ltd. .....	.....	Ownership.....	.75.00 ...	Nationwide Mutual Insurance Company .....	... NO	1
.0140	Nationwide		87-3124154			NW-Gallatin, LLC .....	.. OH.... NIA....	Nationwide Life Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		92-2943602			NW-Holly Springs, LLC .....	.. OH.... NIA....	Nationwide Mutual Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		86-2431839			NW-Hub13, LLC .....	.. OH.... NIA....	NW REI, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		92-3558072			NW-Huntersville, LLC .....	.. OH.... NIA....	Nationwide Mutual Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		47-2482818			NW-Jasper WAG, LLC .....	.. OH.... NIA....	NW REI, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		87-3767006			NW-Kingsbury, LLC .....	.. OH.... NIA....	Nationwide Life Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		81-5146596			NW-Logan, LLC .....	.. OH.... NIA....	NW REI, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		87-1565013			NW-Midtown, LLC .....	.. OH.... NIA....	NW REI, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		85-1246853			NW-Oakbrook, LLC .....	.. OH.... NIA....	NW REI (NLAIC), LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		88-2595124			NW-OG, LLC .....	.. OH.... NIA....	NW REI, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		83-2260477			NW-ORBD, LLC .....	.. OH.... NIA....	NW REI (NMIC), LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		93-1728625			NW-Pleasant Prairie, LLC .....	.. OH.... NIA....	Nationwide Life Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		47-2449044			NW-Promenade at Madison, LLC .....	.. OH.... NIA....	NW REI, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		87-1367836			NW-Rancho, LLC .....	.. OH.... NIA....	NW REI, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		88-1405151			NW-Riverchase, LLC .....	.. OH.... NIA....	Nationwide Life Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		86-3702669			NW-RPG Cranberry, LLC .....	.. OH.... NIA....	NW REI, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		87-0890277			NW-Ruby, LLC .....	.. OH.... NIA....	NW REI (NLIC), LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		87-3273918			NW-San Marco, LLC .....	.. OH.... NIA....	Nationwide Life Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		87-3289289			NW-San Pablo, LLC .....	.. OH.... NIA....	NW REI, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		81-3212025			NW-Springfield, LLC .....	.. OH.... NIA....	NW REI, LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		93-2022585			NW-Spring Hill, LLC .....	.. OH.... NIA....	Nationwide Mutual Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		92-2878794			NW-SR-16, LLC .....	.. OH.... NIA....	Nationwide Mutual Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		92-0677233			NW-UNCC, LLC .....	.. OH.... NIA....	NW REI (NLIC), LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		81-1603024			NW REI (NLAIC), LLC .....	.. OH.... NIA....	Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		81-1619428			NW REI (NLIC), LLC .....	.. OH.... NIA....	Nationwide Life Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		81-1861190			NW REI (NMIC), LLC .....	.. OH.... NIA....	Nationwide Mutual Insurance Company .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		93-4060860			NW-Townsend, LLC .....	.. OH.... NIA....	NW REI (NLAIC), LLC .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	
.0140	Nationwide		31-0947092			OCH Company, LLC .....	.. OH.... NIA....	Nationwide Realty Investors, Ltd. .....	.....	Ownership.....	100.00 ...	Nationwide Mutual Insurance Company .....	... NO	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domesticiliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
.....	.....	.....	26-0263012	.....	.....	Old Track Street Owners Association, Inc. ....	.. OH....	.... OTH....	Other non-Nationwide	n/a .....	.....	.....	Other non-Nationwide .....	.... NO....	.... 2
.0140	Nationwide	13999	27-1712056	.....	.....	Olentangy Reinsurance, LLC .....	.. VT....	.... IA....	Nationwide Life and Annuity Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	31-1486309	.....	.....	Perimeter A, Ltd. .....	.. OH....	.... NIA....	Nationwide Realty Investors, Ltd. .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	20-4939866	.....	.....	Rail Street Parking, LLC .....	.. OH....	.... NIA....	NRI Equity Land Investments, LLC .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	75-2938844	.....	.....	Registered Investment Advisors Services, Inc. ....	.. TX....	.... NIA....	Nationwide Financial Services, Inc. ....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	82-0549218	.....	.....	Retention Alternatives Ltd. ....	.. BMU....	.... IA....	Nationwide Mutual Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide	15580	31-1117969	.....	.....	Scottsdale Indemnity Company .....	.. OH....	.... RE....	Nationwide Mutual Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	41297	31-1024978	.....	Scottsdale Insurance Company .....	.. OH....	.... IA....	Nationwide Mutual Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	10672	86-0835870	.....	Scottsdale Surplus Lines Insurance Company .....	.. AZ....	.... IA....	Scottsdale Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	31-1610040	.....	.....	The Waterfront Partners, LLC .....	.. OH....	.... NIA....	Nationwide Realty Investors, Ltd. ....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... 1
.0140	Nationwide	36269	86-0619597	.....	.....	Titan Insurance Company .....	.. MI....	.... IA....	Nationwide Mutual Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	75-1284530	.....	.....	Titan Insurance Services, Inc. ....	.. TX....	.... IA....	Nationwide Mutual Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	33-0160222	.....	.....	V.P.I. Services, Inc. ....	.. CA....	.... IA....	Veterinary Pet Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide	42285	95-3750113	.....	.....	Veterinary Pet Insurance Company .....	.. OH....	.... IA....	Scottsdale Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide	42889	34-1394913	.....	.....	Victoria Fire & Casualty Company .....	.. OH....	.... IA....	Nationwide Mutual Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	10105	34-1777972	.....	Victoria Select Insurance Company .....	.. OH....	.... IA....	Victoria Fire & Casualty Insurance Company .....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....
.0140	Nationwide .....	.....	31-1486309	.....	.....	Wellington Park, LLC .....	.. OH....	.... NIA....	Nationwide Realty Investors, Ltd. ....	.....	.....	.....	Nationwide Mutual Insurance Company .....	.... NO....	.... ....

Asterisk	Explanation
1	For the purposes of this schedule, Nationwide presumed control of these entities because they are owned by at least 10% and are not wholly-owned by a Nationwide entity.
2	Other ownership indicates a non-ownership circumstance by a Nationwide entity.

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
.....	26-2451988	1492 Capital, LLC	28,725,900	0	0	0	0	0	0	0	28,725,900	0
10127	27-0114983	Allied Insurance Company of America	0	0	0	0	0	0	*	0	0	213,989,385
42579	42-1201931	Allied Property & Casualty Insurance Company	0	0	0	0	0	0	*	0	0	665,065,165
19100	42-6054959	AMCO Insurance Company	0	0	0	0	0	0	*	0	0	1,028,131,608
29262	74-1061659	Colonial County Mutual Insurance Company	0	0	0	0	0	0	*	0	0	248,822,222
18961	68-0066866	Crestbrook Insurance Company	0	13,000,000	0	0	0	0	*	0	13,000,000	816,826,760
42587	42-1207150	Depositors Insurance Company	0	0	0	0	0	0	*	0	0	676,960,150
.....	33-0096671	DVM Insurance Agency, Inc	0	1,487,019	0	0	0	0	0	0	1,487,019	0
15821	47-4523959	Eagle Captive Reinsurance, LLC	(820,000,000)	0	0	0	0	0	0	0	(820,000,000)	(3,953,270,485)
22209	75-6013587	Freedom Specialty Insurance Company	0	0	0	0	0	0	*	0	0	959,352,706
23582	41-0417250	Harleysville Insurance Company	0	0	0	0	0	0	*	0	0	552,943,661
42900	16-1075588	Harleysville Insurance Company of New Jersey	0	0	0	0	0	0	*	0	0	211,926,514
10674	23-2864924	Harleysville Insurance Company of New York	0	0	0	0	0	0	*	0	0	338,382,693
14516	38-3198542	Harleysville Lake States Insurance Company	0	0	0	0	0	0	*	0	0	19,302,892
35696	23-2384978	Harleysville Preferred Insurance Company	0	0	0	0	0	0	*	0	0	229,257,049
26182	04-1989660	Harleysville Worcester Insurance Company	0	0	0	0	0	0	*	0	0	447,737,706
11991	38-0865250	National Casualty Company	0	12,000,000	0	0	0	0	*	0	12,000,000	2,267,141,442
26093	48-0470690	Nationwide Affinity Insurance Company of America	0	0	0	0	0	0	*	0	0	381,440,037
28223	42-1015537	Nationwide Agribusiness Insurance Company	0	60,000,000	0	0	0	0	*	0	60,000,000	1,021,007,637
10723	95-0639970	Nationwide Assurance Company	0	23,000,000	0	0	0	0	*	0	23,000,000	387,078,623
.....	31-1486870	Nationwide Financial Services, Inc	0	(135,000,000)	0	0	0	0	0	0	(135,000,000)	0
23760	31-4425763	Nationwide General Insurance Company	0	28,000,000	0	0	0	0	*	0	28,000,000	1,816,822,863
10070	31-1399201	Nationwide Indemnity Company	0	0	0	0	0	0	*	0	0	1,108,893,666
25453	95-2130882	Nationwide Insurance Company of America	0	31,000,000	0	0	0	0	*	0	31,000,000	1,599,183,421
10948	31-1613686	Nationwide Insurance Company of Florida	0	0	0	0	0	0	*	0	0	102,509,386
92657	31-1000740	Nationwide Life and Annuity Insurance Company	12,600,000	61,900,000	0	0	0	0	0	0	74,500,000	2,784,724,029
66869	31-4156830	Nationwide Life Insurance Company	820,000,000	135,000,000	0	0	0	0	0	0	955,000,000	1,168,546,456
42110	75-1780981	Nationwide Lloyds	0	0	0	0	0	0	*	0	0	245,480
.....	75-3191025	Nationwide Mutual Capital, LLC	109,550	0	0	0	0	0	0	0	109,550	0
23787	31-4177100	Nationwide Mutual Insurance Company	(37,604,704)	(299,610,975)	0	0	0	0	*	0	(337,215,679)	(22,526,249,470)
.....	34-2012765	Nationwide Private Equity Fund, LLC	7,458,254	20,663	0	0	0	0	0	0	7,478,917	0
37877	31-0970750	Nationwide Property & Casualty Insurance Company	0	0	0	0	0	0	*	0	0	1,509,614,008
.....	31-1486309	Nationwide Realty Investors	0	1,060,000	0	0	0	0	0	0	1,060,000	0
83-2250056	83-2250056	Nationwide SBL, LLC	0	5,000,000	0	0	0	0	0	0	5,000,000	0
20-5976272	20-5976272	Nationwide Ventures, LLC	0	22,183,470	0	0	0	0	0	0	22,183,470	0
85-4193218	85-4193218	NCS Arizona, LLC	0	1,900,000	0	0	0	0	0	0	1,900,000	0
82-5194959	82-5194959	NMIC REO Holdings, LLC	0	426,000	0	0	0	0	0	0	426,000	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
.....	46-3762545	NN0V8, LLC	0	62,500,000	0	0	0	0	0	0	62,500,000	0
.....	26-1903919	NW REI, LLC	1,311,000	40,750,343	0	0	0	0	0	0	42,061,343	0
.....	81-1861190	NW-REI (NMFIC), LLC	0	3,770,499	0	0	0	0	0	0	3,770,499	0
13999	27-1712056	Olentangy Reinsurance, LLC	(12,600,000)	(66,900,000)	0	0	0	0	0	0	(79,500,000)	0
.....	15580	Scottsdale Indemnity Company	0	0	0	0	0	0	0	0	0	663,582,913
.....	41297	31-1117969	Scottsdale Insurance Company	0	0	0	0	0	0	0	0	5,043,960,784
.....	10672	86-0835870	Scottsdale Surplus Lines Insurance Company	0	0	0	0	0	0	*	0	65,963,436
.....	36269	86-0619597	Titan Insurance Company	0	0	0	0	0	0	0	0	(17,032)
.....	42285	95-3750113	Veterinary Pet Insurance Company	1,555	(1,494,490)	0	0	0	0	*	0	144,066,647
.....	42889	34-1394913	Victoria Fire & Casualty Company	0	0	0	0	0	0	*	0	5,502,954
.....	10105	34-1777972	Victoria Select Insurance Company	0	0	0	0	0	0	0	0	554,694
.....	33-0160222	VPI Services, Inc	(1,555)	7,471	0	0	0	0	0	0	5,916	0
9999999	Control Totals		0	0	0	0	0	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE Y

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

1 Insurers in Holding Company	2 Owners with Greater Than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 5 Over Column 6 (Yes/No)	8 Granted Disclaimer of Control Affiliation of Column 5 Over Column 6 (Yes/No)
Allied Insurance Company of America	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Allied Property & Casualty Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
AMCO Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Colonial County Mutual Insurance Company	Lone Star General Agency, Inc.	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Crestbrook Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Depositors Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Eagle Captive Reinsurance, LLC	Nationwide Life Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Freedom Specialty Insurance Company	Scottsdale Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Harleysville Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Harleysville Insurance Company of New Jersey	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Harleysville Insurance Company of New York	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Harleysville Lake States Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Harleysville Preferred Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Harleysville Worcester Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Jefferson National Life Insurance Company	Nationwide Life Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Jefferson National Life Insurance Company of New York	Jefferson National Life Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
National Casualty Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Nationwide Affinity Insurance Company of America	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Nationwide Agribusiness Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Nationwide Assurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Nationwide General Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Nationwide Indemnity Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Nationwide Insurance Company of America	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Nationwide Insurance Company of Florida	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Nationwide Life and Annuity Insurance Company	Nationwide Life Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Nationwide Life Insurance Company	Nationwide Financial Services, Inc.	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Nationwide Lloyds	n/a .....	.....	.....	Nationwide Mutual Insurance Company	Nationwide .....	.....	.....NO.....
Nationwide Mutual Insurance Company	n/a .....	.....	.....	Nationwide Mutual Insurance Company	Nationwide .....	.....	.....NO.....
Nationwide Property & Casualty Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Olentangy Reinsurance, LLC	Nationwide Life and Annuity Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Scottsdale Indemnity Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Scottsdale Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Scottsdale Surplus Lines Insurance Company	Scottsdale Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Titan Insurance Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Veterinary Pet Insurance Company	Scottsdale Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Victoria Fire & Casualty Company	Nationwide Mutual Insurance Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....
Victoria Select Insurance Company	Victoria Fire & Casualty Company	100.000	.....NO.....	Nationwide Mutual Insurance Company	Nationwide	100.000	.....NO.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

MARCH FILING

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

APRIL FILING

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

MAY FILING

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

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

SUPPLEMENTAL FILINGS

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

MARCH FILING

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

APRIL FILING

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

AUGUST FILING

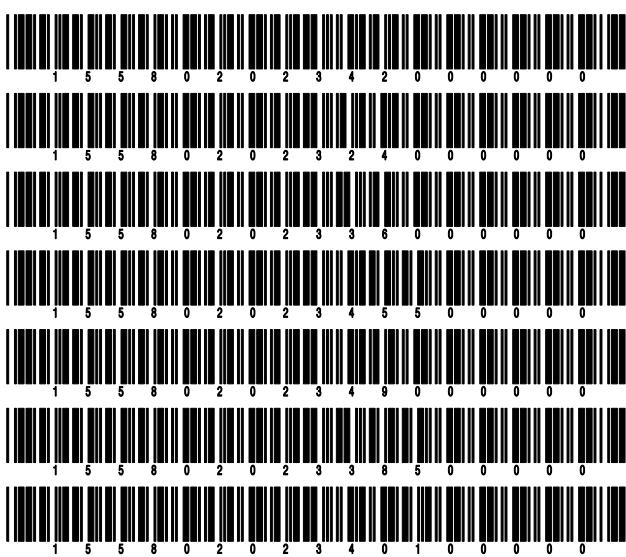
38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES
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Explanations:

- 11.
- 12.
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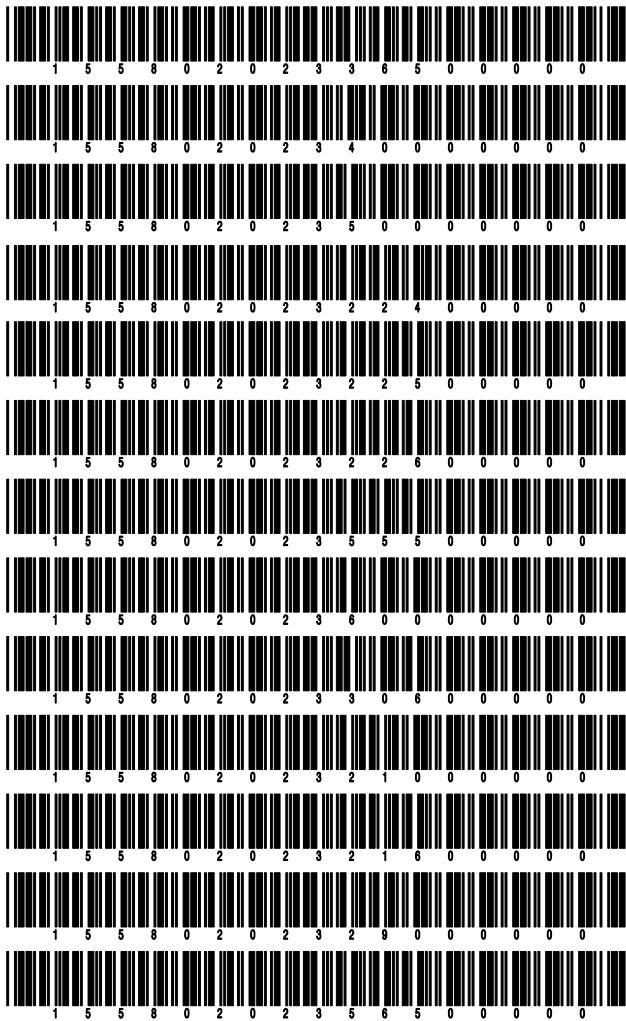
Bar Codes:

11. SIS Stockholder Information Supplement [Document Identifier 420]
12. Financial Guaranty Insurance Exhibit [Document Identifier 240]
13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
14. Supplement A to Schedule T [Document Identifier 455]
15. Trusted Surplus Statement [Document Identifier 490]
16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]
17. Reinsurance Summary Supplemental Filing [Document Identifier 401]



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 18. Medicare Part D Coverage Supplement [Document Identifier 365]
- 21. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]
- 22. Bail Bond Supplement [Document Identifier 500]
- 24. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- 25. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 26. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 27. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]
- 29. Market Conduct Annual Statement (MCAS) Premium Exhibit [Document Identifier 600]
- 31. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 32. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 33. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]
- 35. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]
- 37. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY
OVERFLOW PAGE FOR WRITE-INS

NONE



SUPPLEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

For The Year Ended December 31, 2023
(To Be Filed by March 1)

NAIC Group Code 0140

NAIC Company Code 15580

Company Name SCOTTSDALE INDEMNITY COMPANY

If the reporting entity writes any director and officer (D&O) business, please provide the following:

1. Monoline Policies

Direct Premiums		Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Written	2 Earned	3 Paid	4 Incurred	5 Paid	6 Incurred	7 Claims Made	8 Occurrence
\$66,314,892	\$68,444,018	\$2,976,283	\$4,013,782	\$11,964,861	\$12,590,116	100.0 %	%

2. Commercial Multiple Peril (CMP) Packaged Policies

2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? Yes [] No [X]

2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated? Yes [] No [X]

2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies

2.31 Amount quantified: \$

2.32 Amount estimated using reasonable assumptions: \$

2.4 If the answer to question 2.1 is yes, please provide the following:

Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Paid	2 Paid + Change in Case Reserves	3 Paid	4 Paid + Change in Case Reserves	5	6
\$	\$	\$	\$	%	%



SUPPLEMENT FOR THE YEAR 2023 OF THE SCOTTSDALE INDEMNITY COMPANY

EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

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

(To Be Filed by March 1)

NAIC Group Code 0140

NAIC Company Code 15580

	Direct Business Only			
	Prior Year		Current Year	
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1. Completed operations	56,954	4,675	.....	.....
2. Errors & omissions (E&O)	58,927,500	56,088,365	9,487,828	7,729,350
3. Directors & officers (D&O)	73,028,438	66,227,195	2,976,283	2,615,780
4. Environmental liability	63,070	68,883	10,000	.....
5. Excess workers' compensation .....	.....	.....	.....	.....
6. Commercial excess & umbrella	9,169,648	10,030,329	19,716,271	50,136,310
7. Personal umbrella	80,336	8,315	11,876,545	9,365,969
8. Employment liability	71,355,285	64,632,016	22,214,160	11,254,638
9. Aggregate write-ins for facilities & premises (CGL)	17,288,918	19,447,271	10,596,645	27,408,957
10. Internet & cyber liability	400	600	.....	.....
11. Aggregate write-ins for other	8,488	736	0	0
12. Total ASL 17 - other liability (sum of Lines 1 through 11)	229,979,037	216,508,385	76,877,732	108,511,004
DETAILS OF WRITE-INS				
0901. Premises and Operations Liability .....	.....	.....	10,488,144	27,407,957
0902. Aggregate of facilities & premises (CGL) lines of business less than 10% of category	17,288,918	19,447,271	108,501	1,000
0903. .....	.....	.....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998)(Line 9 above)	17,288,918	19,447,271	10,596,645	27,408,957
1101. Aggregate of other lines of business less than 10% of category	8,488	736	.....	.....
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)	8,488	736	0	0