



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
SCOTTSDALE INDEMNITY COMPANY

NAIC Group Code01400140NAIC Company Code15580Employer's ID Number31-1117969
(Current)(Prior)

Organized under the Laws ofOHIO, State of Domicile or Port of EntryOH
Country of DomicileUnited States of America

Incorporated/Organized11/14/1984Commenced Business08/01/1985

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

Main Administrative Office18700 N. HAYDEN ROAD
(Street and Number)
SCOTTSDALE, AZ, US 85255480-365-4000
(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Mail AddressONE WEST NATIONWIDE BLVD., 1-14-301COLUMBUS, OH, US 43215-2220
(Street and Number or P.O. Box)(City or Town, State, Country and Zip Code)

Primary Location of Books and RecordsONE WEST NATIONWIDE BLVD., 1-14-301
(Street and Number)
COLUMBUS, OH, US 43215-2220614-249-1545
(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Internet Website AddressWWW.NATIONWIDE.COM

Statutory Statement ContactANDREA D. IACOBONI614-249-1545
(Name)(Area Code) (Telephone Number)
FINRPT@NATIONWIDE.COM866-315-1430
(E-mail Address)(FAX Number)

OFFICERS

PRESIDENTRUSSELL MARK JOHNSTONVP & TREASURERKIMBERLY ELLEN LACKER #

SVP & SECRETARYDENISE LYNN SKINGLE

OTHER

KEVIN PAUL SCHEIDERER #, VP-CHIEF TAX OFFC

DIRECTORS OR TRUSTEES

MARK ALLEN BERVENOSCAR GUERRERO
CASEY ELLEN KEMPTON #DAVID NEIL NELSONRUSSELL MARK JOHNSTON

State ofOHIOSS
County ofFRANKLIN

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

KIMBERLY ELLEN LACKER
VP & TREASURER

Subscribed and sworn to before me this4th day ofFEBRUARY 2025

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



Ryan James Lamb
Notary Public, State of Ohio
Commission #: 2024-RE-883431
My Commission Expires 10-30-29



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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						27	19		(19)	1		(750)
2.1	Allied Lines	147	5,844		92		(1,770)	2,267		(278)	94	40	8
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)					60		149		(3)	1		
5.2	Commercial Multiple Peril (Liability Portion)								(2,452)	(2,452)			
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine						35	(1)		(16)	11		
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake						5	1		(1)			
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	3,412	1,848		1,564		9,153	19,370	893	4,338	16,395	887	114
17.2	Other Liability - Claims-Made	3,381,233	3,604,184		1,574,019	817,436	198,192	1,575,870	525,094	387,066	1,287,824	954,672	107,985
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence												
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability					30,000	(15,687)	10,227	5,671	(1,321)	3,433		
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage						(44)	(2)		(25)	160		
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft						24	52		(1)			
27.	Boiler and Machinery						574	576		(1)	1		
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	3,384,792	3,611,877		1,575,675	847,436	190,570	1,608,530	529,206	387,287	1,307,920	955,599	107,357
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines						(2)						
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence						5	7					
17.2 Other Liability - Claims-Made						(1,480)	2,693		(723)	1,607		2,350
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)						(1,477)	2,700		(723)	1,607		2,350
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	1,076,731	1,114,648		476,630	709,364	648,239	286,245	(83,182)	(92,179)	36,721	268,771	(6,999)
2.1	Allied Lines	2,425,557	2,276,759		1,172,008	142,694	4,268,955	4,574,678	22,058	58,826	86,799	621,548	1
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril	11,161	9,408		6,392		(204)	1,561		70	233	2,790	1
4.	Homeowners Multiple Peril	1,434,381	1,331,038		744,223	170,725	108,697	462,830	65,001	120,080	88,265	359,803	1
5.1	Commercial Multiple Peril (Non-Liability Portion)	4,103,349	4,017,417		2,036,132	2,245,806	2,064,879	1,853,023	8,875	46,933	164,943	924,522	3
5.2	Commercial Multiple Peril (Liability Portion)	3,469,771	3,388,929		1,441,011	555,061	1,903,963	5,157,246	300,289	455,899	1,282,027	791,871	3
6.	Mortgage Guaranty												
8.	Ocean Marine	(6,138)	104,755		1,014		(17,614)	18,730		(330)	1,256	(1,659)	
9.1	Inland Marine	785,697	1,279,626		306,305		(9,603)	855,547		4,770	43,101	206,330	
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	324	587		45		14	64		4	6	86	
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	18,845,844	17,367,864		11,309,586	2,911,158	7,528,571	19,258,904	636,430	2,616,708	4,979,750	4,127,662	13
17.2	Other Liability - Claims-Made	8,216,278	8,443,808		6,564,714	610,000	2,910,875	6,919,082	97,778	125,036	1,227,852	1,934,737	(6)
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	1,838,458	647,648		1,254,933	50,995	911,174	2,956,126	248,475	296,889	1,739,421	326,234	1
18.2	Products Liability - Claims-Made	321,099	262,991		140,769		263	263		48	48	98,439	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability	741,109	624,993		352,315		12,589	1,734,519	163,822	139,565	153,968	141,210	
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage	1,500	2,658		688		1,172	(790)		(2,181)	6,192	330	
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety	1,451	3,184		235	5,435	5,773	739		551	848	435	
26.	Burglary and Theft						9	9					
27.	Boiler and Machinery	74,228	69,091		31,443	4,571	6,178	5,886	740	4	2,197	19,633	
28.	Credit												
29.	International												
30.	Warranty		987		3,108								
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	43,340,800	40,946,392		25,841,549	7,405,809	20,343,931	44,084,663	1,460,286	3,770,692	9,813,627	9,822,743	(6,984)
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) 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 and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		1,691				135	482		(11)	8		(11)
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					9	33						
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine	336	336		14		(13)	9		(3)	1	84	8
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence					2,264	5,686			(461)	160		
17.2 Other Liability - Claims-Made	1,245,704	1,239,278		547,454	51,817	403,059	4,860	313,091	564,812	231,776	33,592	
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence					(5,580)	837		(5,798)	377			
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	44,611	55,121		1,978	3,764	37,493	(10,587)	13,094	11,153	4,452		
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	21,410	24,724		902	5,371	(801)	(1,002)	(426)	578	5,353	1,512	
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft	3,261	2,310		951		126	126	52	52	978	91	
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	1,315,322	1,323,459		551,299	5,371	51,721	446,724	4,860	295,856	579,081	249,344	39,646
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	987,339	297,905		842,597	63,736	78,201	2,212,638	8,722	3,675	23,265	130,186	22,452
2.1	Allied Lines	299,916	383,684		183,799	172,707	(565,878)	1,380,939	18,834	8,486	95,919	65,899	7,220
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood		107										
3.	Farmowners Multiple Peril	4,344	1,253		3,489	143	50	21,748	6	(532)	778	13	102
4.	Homeowners Multiple Peril						4,193	4,193		270	270		
5.1	Commercial Multiple Peril (Non-Liability Portion)	203,951	641,255		88,798	494,886	(1,467,831)	16,283,480	(722)	(59,761)	75,832	76,837	4,853
5.2	Commercial Multiple Peril (Liability Portion)	49,525	663,272		3,874	4,833,876	2,655,289	9,265,869	21,448	(658,769)	1,424,544	2,336	1,172
6.	Mortgage Guaranty												
8.	Ocean Marine		3,052				(549)	551		16	39		
9.1	Inland Marine	16,591	248,962		2,552	274,810	269,473	110,007	67,026	29,225	29,644	4,503	1,283
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	936,046	1,610,987		312,795	9,575,474	1,770,993	21,809,870	784,833	(456,616)	3,015,977	189,434	22,024
17.2	Other Liability - Claims-Made	20,342,095	22,054,040		8,101,894	7,083,242	7,147,500	15,742,940	3,475,218	1,453,757	10,794,238	6,016,769	508,637
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	701,758	655,103		225,753	240,000	474,839	1,706,896	212,306	456,773	423,205	124,399	16,497
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability	336,926	2,422,095		497,770	21,763,287	2,675,358	23,041,938	1,931,685	1,012,434	2,868,280	152,664	83,897
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage	66,918	675,386		82,875	1,040,423	307,786	35,026	93,697	(114,802)	364,450	30,105	(2,836)
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft	2,972	3,347		1,260	(1,690)	(1,605)	169		(7)	5	713	71
27.	Boiler and Machinery	40,911	64,912		18,665		2,799	4,956		(170)	112	10,351	983
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	23,989,291	29,725,360		10,366,122	45,540,894	13,356,871	91,621,312	6,613,052	1,673,999	19,116,571	6,804,197	666,354
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 490
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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						40	25		(11)	2		
2.1	Allied Lines	18,854	6,199		16,683		393	1,416		(97)	41	5,185	384
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)		13				(211)	100		(2)	3		
5.2	Commercial Multiple Peril (Liability Portion)						183	1,191	2,738	(22,358)	283		
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine						6						
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	7,482	14,388		2,971	34,525	69,826		4,990	19,354	1,965	200	
17.2	Other Liability - Claims-Made	5,340,053	5,856,742		2,443,403	3,297,468	5,600,663	1,489,637	236,717	1,976,373	1,595,876	111,679	
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence					94	174		12	63			
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability					(32,289)	17,534		(5,204)	4,799			
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage	(561)	1,010		7,851	4,166	(1,172)		(644)	3,515	(112)	10	
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft					(377)	199		(94)	79			
27.	Boiler and Machinery					18	18						
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	5,365,828	5,878,351		2,463,058	1,986,030	3,304,015	5,689,975	1,492,374	213,311	2,004,511	1,602,914	112,273
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	29,618	28,127		18,256		(1,454)	3,369		98	392	7,849	483
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood	2,545	2,501		1,596		(468)	339		7	51	674	41
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						(54)	1		(65)	5		
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	319	313		200		(62)	50		1	8	85	5
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b).....												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence		4				(1)	42		(6)	16		
17.2 Other Liability - Claims-Made	87,548	136,706		47,389		(262,534)	751,381		(114,120)	249,754	13,053	1,503
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	120,030	167,651		67,441		(264,573)	755,182		(114,085)	250,226	21,660	2,032
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024					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	68,229	111,123		34,973	71,031	35,762	(1,815)	43	(576)	936	15,879	(448)	
2.1	Allied Lines	303,728	310,150		126,836		(13,751)	36,770		(2,255)	5,119	71,142	347	
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril	25,577	19,624		24,511		(323)	457		4	92	5,755		
4.	Homeowners Multiple Peril	834,883	901,908		462,995	279,342	239,578	250,107	7,303	5,046	9,846	187,850	4,243	
5.1	Commercial Multiple Peril (Non-Liability Portion)	611,375	635,368		305,573	212,237	177,829	63,160	32,732	34,576	22,291	122,053	41	
5.2	Commercial Multiple Peril (Liability Portion)	595,564	642,097		243,662	268,579	64,864	842,818	46,664	(11,738)	282,434	118,858	26	
6.	Mortgage Guaranty													
8.	Ocean Marine	46,661	81,564		1,333		(2,236)	11,203		13	770	13,918	19	
9.1	Inland Marine	48,762	48,280		20,990		(6,435)	20,764		(1,883)	2,484	11,080	95	
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made													
12.	Earthquake	7	7				23	(7)		(25)	19	2		
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)													
14.	Credit A&H (Group and Individual)													
15.1	Vision Only (b)													
15.2	Dental Only (b)													
15.3	Disability Income (b)													
15.4	Medicare Supplement (b)													
15.5	Medicaid Title XIX (b)													
15.6	Medicare Title XVIII (b)													
15.7	Long-Term Care (b)													
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)													
16.	Workers' Compensation													
17.1	Other Liability - Occurrence	1,631,451	1,721,582		699,389	662,290	181,600	2,375,641	89,732	90,882	549,121	332,202	1,634	
17.2	Other Liability - Claims-Made	4,729,031	2,297,308		4,620,237	164,358	167,151	1,191,174	30,688	63,365	368,248	1,306,290	145	
17.3	Excess Workers' Compensation													
18.1	Products Liability - Occurrence	24,058	21,884		7,318		34,118	297,374		(16,200)	138,806	4,394	1	
18.2	Products Liability - Claims-Made	161,335	161,796		33,568							45,980		
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2	Other Private Passenger Auto Liability													
19.3	Commercial Auto No-Fault (Personal Injury Protection)						(3,985)	1,568		(804)	538			
19.4	Other Commercial Auto Liability	37,484	74,521		18,947		(69,031)	161,047		(10,665)	13,653	8,317	9	
21.1	Private Passenger Auto Physical Damage													
21.2	Commercial Auto Physical Damage						(986)	1,771		(220)	1,096			
22.	Aircraft (all perils)													
23.	Fidelity													
24.	Surety	974	719		254		121	121		22	22	292	1	
26.	Burglary and Theft						124	125		(1)				
27.	Boiler and Machinery	4,598	5,434		1,738		990	1,014		(24)	11	920		
28.	Credit													
29.	International													
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34.	Aggregate Write-Ins for Other Lines of Business													
35.	Total (a)	9,123,717	7,033,368		6,602,325	1,657,837	805,415	5,253,293	207,162	149,519	1,395,487	2,244,933	6,113	
DETAILS OF WRITE-INS														
3401.														
3402.														
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page													
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)													

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		30				(34)	15		(9)	2		
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					6		16					
5.2 Commercial Multiple Peril (Liability Portion)					(13)		26		(5)	8		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	7,336	6,709		3,335		5,916	6,555		1,358	1,595	1,911	151
17.2 Other Liability - Claims-Made	1,753,751	1,898,636		827,992	804,420	267,743	2,349,028	997,041	886,154	1,372,166	525,753	34,449
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence							2			1		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						1	5					
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	1,761,087	1,905,375		831,327	804,420	273,619	2,355,647	997,041	887,497	1,373,770	527,665	34,600
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines	133,231	153,137		48,775		492,060	567,971		39,592	43,213	826	613
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril						5,636	5,636		283	283		
5.1	Commercial Multiple Peril (Non-Liability Portion)		8			(74)	15			(1)	6		3,139
5.2	Commercial Multiple Peril (Liability Portion)					(6)	34		1,247	1,242	10		
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine						(41)	1		(21)	2		
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	21,694	20,901		6,917		(922,856)	151,044		(25,611)	61,657	5,091	290
17.2	Other Liability - Claims-Made	16,835,684	18,646,669		6,654,846	4,322,730	4,948,747	10,944,069	2,623,893	1,302,329	7,792,406	5,043,675	162,367
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	1,471	939		1,103		(636)	3,083		(660)	1,327	103	16
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)	2,078	3,310		269	6,185	(18,435)	14,628	20,946	8,089	4,296	541	(68)
19.4	Other Commercial Auto Liability	81,729	141,252		13,931	368,752	(353,158)	286,958	1,301	(64,901)	89,473	20,741	349
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage	34,425	37,229		4,686	93,098	153,212	59,477		4,995	8,557	8,612	614
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft							5					
27.	Boiler and Machinery	6,658	6,608		2,497		23,212	26,326		1,882	2,016		69
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	17,116,970	19,010,054		6,733,023	4,790,765	4,327,662	12,059,247	2,647,386	1,267,219	8,003,247	5,079,588	167,389
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) 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 and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	3,200	11,139		5,340		(3,827)	3,936		(834)	798	960	489
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)	(80)	8,992				(2,940)	(196)		(214)	433	(16)	(98)
5.2 Commercial Multiple Peril (Liability Portion)	3,183	3,826		5,340		(3,088)	4,415		(671)	1,230	957	508
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine	(88)	38,552			100,965	105,798	(472)	336	(6,267)	5,051	(34)	160
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												200
17.1 Other Liability - Occurrence	28,960	32,847		24,152		12,808	21,142		2,148	5,634	7,375	1,967
17.2 Other Liability - Claims-Made	6,768,938	7,347,738		2,901,401	1,688,805	1,151,763	4,245,046	613,595	(35,150)	3,397,124	1,997,379	327,073
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence		18,085		5,565	23,815	29,720	6,275	229	3,878	3,774		(38)
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	(23,919)	444,829		2,589,106	380,069	2,899,651	208,400	17,876	451,626	(10,846)	(3,792)	
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	(5,690)	92,769		61,778	28,985	(19,091)	91,662	51,122	41,759	(1,754)	(471)	
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft	8,466	6,058		4,742		(441)	1,346		(22)	469	2,540	264
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	6,782,970	8,004,835		2,946,539	4,464,469	1,698,847	7,162,051	914,222	31,865	3,907,900	1,996,561	326,263
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ (55)
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire						(125)	58		(16)	6		
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence						13,764	29,860		(76)	9,211		
17.2 Other Liability - Claims-Made	29,051	32,250		10,206		(1,623)	13,431		(2,517)	7,480	8,715	1,239
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence						149	253		13	77		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	29,051	32,250		10,206		12,165	43,602		(2,596)	16,774	8,715	1,239
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	3,093	2,482		2,961		230	633		(3)	10	851	54
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)						3	9					
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						(1,469)	94		(70)	9		27
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence						(96)	40		(2)	7		
17.2 Other Liability - Claims-Made	829,248	991,508		371,310	325,935	566,802	901,505	127,469	(16,604)	458,169	248,533	14,111
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	(21)	7,142			12,443	(24,134)	16,165		(1,541)	4,026	(4)	82
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	7	1,864				(178)	(340)		44	331	1	16
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	832,327	1,002,996		374,271	338,378	541,158	918,104	127,469	(18,176)	462,552	249,381	14,290
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	1,107	18,056		1,023	(348)	(180)	5,404		(281)	172	304	(96)
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril						2,017	2,017		109	109		
5.1 Commercial Multiple Peril (Non-Liability Portion)	1,298	34,277			13,859	20,492			357	891	227	(195)
5.2 Commercial Multiple Peril (Liability Portion)	1			331	6	46			(4)	13		(2)
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						212	(5)		(41)	50		
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake						14	(4)		(13)	7		
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	11,574	12,727		103		6,291	73,954		(4,901)	18,520	2,539	62
17.2 Other Liability - Claims-Made	7,634,547	8,368,731		3,283,517	1,668,544	1,407,598	5,144,773	1,336,359	527,185	4,155,936	2,273,212	93,141
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence					66,084	62,000	1,293		(228)	531		(1)
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	5,395	72,494			328,419	(90,250)	218,769	20,125	1,791	50,954	1,270	4,626
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	(1,900)	8,603				(118)	(521)	(96)	(217)	1,287	(285)	(72)
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft		1,519				(2,121)	1,514		(518)	612		(8)
27. Boiler and Machinery						144	144		(2)	1		
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	7,652,022	8,516,408		3,284,974	2,062,700	1,399,472	5,467,875	1,356,388	523,238	4,229,082	2,277,269	97,456
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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												
2.1	Allied Lines		12,242				588	3,548		(117)	73		(18)
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)	678	750			(417)	73		(22)	58	119	24	
5.2	Commercial Multiple Peril (Liability Portion)		60			(496)	716		(154)	165		(1)	
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine	(547)	20,467			(600)	7,768	(336)	(3,904)	2,424	(156)	(40)	
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake					15	(3)		(12)	7			
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	(124)	48			(7,775)	27,532		(7,414)	9,875	(25)	(2)	
17.2	Other Liability - Claims-Made	2,667,436	2,834,896		1,148,463	743,333	553,965	1,372,267	172,347	(39,407)	960,382	794,795	38,030
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence					(1)					1		
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability	(1,740)	94,553		778,429	249,617	813,615	44,471	(44,422)	113,576	(575)	(189)	
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage	(5,009)	19,078		3,914	(3,492)	(977)		(2,803)	28,594	(982)	(149)	
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft	4,240	2,377		2,002	47	126	32		50	1,272	64	
27.	Boiler and Machinery					311	312	(2)		1			
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	2,664,934	2,984,469		1,150,464	1,525,077	800,130	2,216,872	216,818	(98,225)	1,115,208	794,447	37,721
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ (10)
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	1,427	1,090		1,368		46	303		(9)	6	392	19
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					(529)	(169)	(52)			71		
5.2 Commercial Multiple Peril (Liability Portion)					(281)	380	(73)			120		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine		2,116				5,204	(72)		(2,104)	653		(12)
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence		578			(573)	1,725	(847)			413		(1)
17.2 Other Liability - Claims-Made	1,850,333	1,793,300		662,004	257,635	322,554	1,103,647	3,016,296	345,080	1,324,550	496,786	26,086
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	135,751	813,548			1,599,488	346,411	1,031,888	38,857	(22,517)	140,337	16,571	482
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	2,136	8,585			9,739	7,458	(896)		(1,133)	6,821	427	869
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						(62)	16		(53)	26		
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	1,989,647	2,619,218		663,372	1,866,862	680,229	2,136,822	3,055,153	318,292	1,472,998	514,176	27,443
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	5,422	1,897		5,196		117	467		(90)	66	1,491	111
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					(662)	(37)			(43)	42		
5.2 Commercial Multiple Peril (Liability Portion)					(483)	482			(94)	129		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						128	(11)		(102)	76		
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b).....												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence					(3,464)	8,117			(2,196)	2,414		
17.2 Other Liability - Claims-Made	1,639,154	1,635,899		610,995	223,187	261,861	1,215,355	32,469	(459,816)	698,007	470,581	33,026
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)	(36)	71			(114)	170			(15)	41	(5)	7
19.4 Other Commercial Auto Liability	(1,627)	3,651			(34,122)	32,183			(4,500)	7,330	(244)	337
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	(1,906)	4,061			(30)	(147)	(614)		(61)	1,471	(286)	370
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						3	8					
27. Boiler and Machinery						250	252		(23)	7		
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	1,641,007	1,645,578		616,191	223,157	223,367	1,256,372	32,469	(466,940)	709,582	471,537	33,851
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	10,371	10,285		6,482		719	2,033		(65)	41	2,852	993
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					12	23	(1)		(1)			
5.2 Commercial Multiple Peril (Liability Portion)							1					
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						1						
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake						13	1		(6)	1		
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence					(1,829)	8,385			(2,803)	727		
17.2 Other Liability - Claims-Made	1,563,956	1,663,477		672,495	98,500	(75,845)	1,182,575	226,383	238,264	710,841	459,419	44,501
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence						(2)	2		(1)	2		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)	11	268			(10,000)	(11,140)	1,055		(190)	285	(13)	50
19.4 Other Commercial Auto Liability	463	20,429				(32,727)	56,851	7,860	17,079	27,807	(1,166)	3,707
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	465	11,873				(1,008)	(1,643)		1	2,309	(648)	5,054
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						28	28					
27. Boiler and Machinery						447	447		(2)			
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	1,575,266	1,706,332		678,977	88,500	(121,331)	1,249,756	234,243	252,277	742,014	460,445	54,305
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	30,227	18,132		18,892		3,972	6,395		(113)	96	8,312	739
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine		5,724				(2,277)	(136)		(137)	6		(1,119)
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake						(1)						
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	6,142	3,327		2,815		1,080	1,082		322	325	1,597	226
17.2 Other Liability - Claims-Made	463,089	464,327		88,491		969	567,134		(67,434)	278,724	99,609	3,695
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence						(13)	16		(9)	10		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability						375	420		30	43		
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	499,458	491,510		110,198		4,106	574,911		(67,341)	279,204	109,518	3,542
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	150	174		81		(34)	62		(9)	21	45	3
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)	150	150		81		(35)	193		(25)	56	45	3
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						534	16		(198)	114		
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence						(28)	303		(246)	(155)		
17.2 Other Liability - Claims-Made	473,297	524,761		212,154	24,269	(11,617)	208,629	90,174	(64,807)	737,186	141,989	9,580
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability						(3,912)	3,156		(736)	926		
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)						55	(40)		(90)	296		
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	473,597	525,084		212,317	24,269	(15,037)	212,318	90,174	(66,110)	738,445	142,079	9,586
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		5,048				54	1,690		(65)	61		
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					20	50			(1)			
5.2 Commercial Multiple Peril (Liability Portion)					(238)	727			(116)	242		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	161,018	135,218		100,143		37,776	222,116		(6,188)	11,118	28,434	3,235
17.2 Other Liability - Claims-Made	4,337,328	5,102,912		1,501,438	1,243,636	739,134	2,675,562	304,457	(579,650)	1,846,443	1,293,130	88,485
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence						58	27		6	33		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)	(308)	2,947				884	1,504		315	431	(77)	(5)
19.4 Other Commercial Auto Liability	27,424	48,338		2,324		8,117	30,944		(4,776)	9,891	6,706	577
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	13,327	17,425		562	(72)	(675)	(1,098)		89	1,446	3,332	283
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft	2,924	2,924		1,242		(1,231)	1,260		(257)	470	877	58
27. Boiler and Machinery						42	42					
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	4,541,713	5,314,812		1,605,710	1,243,564	783,939	2,932,822	304,457	(590,644)	1,870,135	1,332,403	92,634
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) 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 and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		6,898				2,047	2,047		39	39		
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					1	1	1					
5.2 Commercial Multiple Peril (Liability Portion)					241	241	241		65	65		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	29,659	31,271		2,592		84,084	84,084		27,140	27,140	6,715	676
17.2 Other Liability - Claims-Made	431,827	151,422		350,005		298,876	298,876		233,424	233,424	76,867	9,781
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence	6,332	6,149		264		10,462	10,462		4,709	4,709	1,393	144
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	467,818	195,740		352,861		395,712	395,712		265,376	265,376	84,975	10,602
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire						25	16		(3)	1		
2.1	Allied Lines		13,869				(220)	3,990		(118)	66		(35)
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)					(3,202)	14			(13)	27		
5.2	Commercial Multiple Peril (Liability Portion)					(434)	2,994			(141)	782		
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine						539	9		(599)	369		2
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence					(1,367)	4,482			(741)	1,069		
17.2	Other Liability - Claims-Made	4,269,655	4,592,093		1,834,348	372,449	460,367	2,559,400	1,157,710	162,166	2,052,541	1,264,986	58,049
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence					(12)	(12)			12	12		
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)	716	507		209	(6,195)	5,980			(957)	1,573	186	(35)
19.4	Other Commercial Auto Liability	2,390	3,147		697	(57,298)	38,215			(9,148)	12,785	621	1,633
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage	1,185	975		346		350	(173)		(955)	2,854	308	27
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft	2,750	2,750		1,490	(661)	1,024			(128)	367	825	38
27.	Boiler and Machinery					38	38						
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	4,276,696	4,613,341		1,837,089	372,449	391,930	2,615,977	1,157,710	149,374	2,072,446	1,266,927	59,678
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire						7	5		(1)			
2.1	Allied Lines	(200)	3,514				(147)	1,216		(110)	92	(60)	(4)
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril						2,017	2,017		109	109		
5.1	Commercial Multiple Peril (Non-Liability Portion)	32	38				34	232		2	2	6	1
5.2	Commercial Multiple Peril (Liability Portion)	(200)	(86)				11	39		(2)	12	(60)	(4)
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine						357	(2)		(179)	78		
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	30,229	48,195		41,991		21,873	23,314		730	849	6,940	636
17.2	Other Liability - Claims-Made	6,097,868	6,755,977		2,308,418	2,102,204	1,841,005	4,806,767	764,036	519,635	2,569,569	1,829,111	121,957
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence						1	3			1		
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)		194				(1,135)	1,044		(150)	321		
19.4	Other Commercial Auto Liability		7,651			(29,106)	(61,326)	24,608		6,032	9,019		
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage		923			32,077	31,841	57		(282)	558		
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft						(712)	328		(250)	170		
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	6,127,729	6,816,405		2,350,409	2,105,174	1,833,825	4,859,628	764,036	525,531	2,580,781	1,835,936	122,586
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		3,081				300	882		(23)	15		(170)
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					12		36					
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence												
17.2 Other Liability - Claims-Made	947,487	1,005,950		351,927	121,039	(100,557)	426,264	5,280	(70,923)	284,065	281,916	3,327
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft		500				(1,368)	983		(283)	377		(95)
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	947,487	1,009,531		351,927	121,039	(101,613)	426,165	5,280	(71,228)	284,457	281,916	3,062
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		6,689				57	2,011		(102)	45		
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					(474)	48			(6)	7		
5.2 Commercial Multiple Peril (Liability Portion)					(144)	750,452			(33,176)	48,056		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine	(387)	441				609	(15)		(306)	195	(77)	(8)
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake						6			(2)	1		
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	3,810	4,873				223	10,503		(1,822)	2,406	1,075	76
17.2 Other Liability - Claims-Made	2,828,726	3,160,703		1,040,042	270,000	(156,921)	1,776,200	700,515	721,693	1,456,259	831,396	56,575
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	1,381	19,983		2,533	13,565	(20,050)	100,364		(9,324)	15,986	628	28
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	(2,106)	11,987		280	11,935	13,665	264		(211)	4,067	(367)	(42)
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						9	14		(1)			
27. Boiler and Machinery						109	109		(1)			
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	2,831,424	3,204,676		1,042,855	295,500	(162,911)	2,639,949	700,515	676,743	1,527,021	832,656	56,629
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 10
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		1,172				15	371		(17)	24		(12)
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					(25)	1						
5.2 Commercial Multiple Peril (Liability Portion)	(67)	158			6	172			(5)	45	(10)	11
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence					(70)	314			(77)	48		
17.2 Other Liability - Claims-Made	931,225	938,126		373,497	416,607	314,987	434,607	220,029	23,926	535,693	276,618	27,054
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability						(1)	4		2			
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	931,158	939,456		373,497	416,607	314,912	435,469	220,029	23,830	535,810	276,608	27,053
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	2,706	113		2,593		6	6		(1)	2	744	41
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					(244)				(12)	9		(2)
5.2 Commercial Multiple Peril (Liability Portion)					(76)		68		(14)	18		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						117	(5)		(296)	41		
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence					(1,735)		12,776		(2,383)	1,834		
17.2 Other Liability - Claims-Made	883,764	909,463		334,114	(121,609)		549,786	56,170	(117,853)	269,811	264,895	12,647
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence							5		(3)	1		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability		15			(52,454)		32,710		(11,618)	11,951		(8)
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage		66				(736)	1,731		(418)	880		(7)
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery						2	2					
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	886,470	909,656		336,708		(176,729)	597,077	56,170	(132,598)	284,546	265,640	12,670
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	4,986	11,549		3,173		(953)	3,679		(307)	457	1,466	138
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					(58)		20		(10)	14		
5.2 Commercial Multiple Peril (Liability Portion)	3,804	3,341		2,061	(63)		1,438		(59)	221	1,141	128
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						35			(101)	63		
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence					(3,055)		4,647		(696)	1,178		
17.2 Other Liability - Claims-Made	3,385,895	3,364,348		1,376,413	1,140,114	620,940	1,801,529	1,655,483	700,522	1,759,762	1,013,551	118,434
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence						3	12		(2)	4		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	9,044	74,873		1,571	113,483	(104,038)	235,881		(17,563)	34,848	1,966	(274)
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	2,031	17,762		748	28,428	26,826	(2,974)	30,512	13,415	7,525	478	(85)
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						(169)	79		(65)	40		
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	3,405,760	3,471,874		1,383,965	1,282,025	539,468	2,044,310	1,685,995	695,134	1,804,114	1,018,603	118,341
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire						10	10		3	3		
2.1	Allied Lines		185				66	66		5	5		1, 144
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)						9	9		2	2		
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence						22	22		7			
17.2	Other Liability - Claims-Made	2, 866	836		2, 030		32, 277	32, 277		4, 383	4, 383	860	43
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence												
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	2, 866	1, 021		2, 030		32, 385	32, 385		4, 400	4, 400	860	1, 187
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	33,349	19,396		19,912		2,649	2,649		89	89	9,048	700
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood	304	152		172		15	15		1	1	81	6
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine		1,167				1	1		11	11		
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	29	35		18		5	5		1	1	8	1
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	91,093	88,311		25,642		(799,527)	91,869		27,298	27,298	22,096	1,913
17.2 Other Liability - Claims-Made	95,821	87,532		10,516		27,981	27,981		19,836	19,836	28,709	2,105
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence						1	1		1	1		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)	54	38		16		10	10		2	2	14	1
19.4 Other Commercial Auto Liability	431,505	162,198		269,307		37,857	37,857		1,287	1,287	75,611	9,062
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	525	372		153		2	2		5	5	137	11
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft	2,332	2,332				75	75		50	50	700	57
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	655,012	361,532		325,736		(730,932)	160,465		48,580	48,580	136,403	13,855
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire						1	1					
2.1 Allied Lines						2			(3)	2		
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)						11	23		(2)	1		
5.2 Commercial Multiple Peril (Liability Portion)						17	167		(11)	51		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence						(5,711)	8,889		(1,757)	1,610		
17.2 Other Liability - Claims-Made	1,050,670	1,064,987		525,069	650,000	633,872	730,643	282,379	147,627	348,459	315,201	31,552
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability						(9,092)	7,573		(609)	1,224		
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)						22	(96)		(77)	412		
23. Fidelity												
24. Surety												
26. Burglary and Theft									(1)	1		
27. Boiler and Machinery						5	5					
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	1,050,670	1,064,987		525,069	650,000	619,126	747,206	282,379	145,167	351,760	315,201	31,552
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	4,039	3,910		1,335	224	(140)	562	57	97	101	1,129	93
2.1	Allied Lines	239,086	226,991		93,997	(19,483)	(120,686)	28,862	9,681	1,284	3,524	63,224	5,358
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	12,891	12,628		4,674		(1,276)	1,619		49	213	3,377	288
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril							5,636	5,636	283	283		
5.1	Commercial Multiple Peril (Non-Liability Portion)	24,271	39,187		6,126	(11,131)	5,538			259	1,234	4,939	763
5.2	Commercial Multiple Peril (Liability Portion)					(216)	127,665		1,129	(216)	7,087		
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine	3,509,819	3,620,283		1,088,834	202,296	892,040	1,023,634	13,953	17,641	38,524	903,985	81,112
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	35,360	39,637		14,339		(3,279)	5,989		245	751	9,365	830
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	5,972,750	3,214,206		3,357,669	29,799,063	(593,170)	50,981,720	1,081,122	(331,625)	2,197,591	917,821	394,091
17.2	Other Liability - Claims-Made	324,497	365,298		141,459	45,781	198,013	1,981,889	228,402	(513,278)	1,309,891	80,215	7,804
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	1,458	1,821		186	8,116	141,738	247,219	40,250	335,441	408,834	118	39
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)	2	2		(315)		(353)	161	2	22	17		
19.4	Other Commercial Auto Liability	179,424	95,648		83,776	911	13,242	36,267	2,038	(1,939)	1,839	19,609	9,089
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage					7,523	7,414	1		(104)	21		
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft							12					
27.	Boiler and Machinery	43,269	48,060		16,241		629	1,638	3,388	3,374	22	11,466	791
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	10,346,866	7,667,672		4,808,637	30,044,116	528,473	54,448,412	1,380,021	(488,467)	3,969,933	2,015,247	500,258
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	43	7,297		30		140	2,160		(86)	44	12	(86)
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					31		76		(2)			
5.2 Commercial Multiple Peril (Liability Portion)					3		11		(2)	3		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						15						
9.2 Pet Insurance Plans									(4)			
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	60,052	38,923		44,293		3,189	308,215	165	(6,724)	29,169	4,690	1,075
17.2 Other Liability - Claims-Made	4,291,827	4,654,982		1,703,492	279,826	4,897	2,101,409	112,636	(290,328)	1,401,675	1,283,323	71,965
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence	59,659	38,810		44,744		5,109	37,162		(656)	14,371	4,176	937
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability						(18,224)	11,962		(3,121)	4,137		
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage		477			(38,967)	(38,920)	(330)	44	(475)	952		(18)
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft	8,240	6,625		4,323		473	2,198		145	629	2,472	162
27. Boiler and Machinery						32	32					
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	4,419,821	4,747,113		1,796,883	240,859	(43,255)	2,462,895	112,845	(301,252)	1,450,980	1,294,673	74,034
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		99				(22)	39		(3)	1		
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					1		6					
5.2 Commercial Multiple Peril (Liability Portion)							6			2		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						3			(1)			
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence												
17.2 Other Liability - Claims-Made	667,421	687,050		248,425	30,272	(82,769)	270,520		(49,243)	160,765	200,226	12,045
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)							9		(1)	2		
19.4 Other Commercial Auto Liability						(17)	354		(53)	81		
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage						(3)			(2)	11		
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	667,421	687,148		248,425	30,272	(82,806)	270,934		(49,303)	160,862	200,226	12,045
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	6,395	15,669		4,231		445	4,084		(167)	121	1,754	76
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood		16				(9)	3			1		
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					(227)	6			(17)	18		
5.2 Commercial Multiple Peril (Liability Portion)	(200)	(108)		109	(84)	443			(47)	92	(60)	(3)
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine	2	4,338				347	(115)		(392)	380		(16)
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake		16				(7)	3			1		
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	15,640	20,145		6,723		6,791	364,811	6,609	(9,250)	167,122	3,410	1,181
17.2 Other Liability - Claims-Made	5,119,092	5,524,908		1,961,536	592,471	491,947	4,002,643	315,338	(297,115)	2,201,762	1,511,326	70,627
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence						(20)	12		5	5		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	(225)	18,009				(69,846)	71,792		(7,930)	18,365	(45)	(1,318)
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	(9)	7,178				(524)	(1,281)		(195)	1,964	(2)	(30)
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft	1,000	1,000		458		(72)	305		1	99	300	14
27. Boiler and Machinery						218	218					
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	5,141,695	5,591,170		1,973,058	592,471	428,958	4,442,926	321,947	(315,108)	2,389,927	1,516,683	70,532
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		4,511				1,275	1,275		20	20		(2,368)
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)		3			5	5	5		2	2		(19)
5.2 Commercial Multiple Peril (Liability Portion)					13	13	13		4	4		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence												
17.2 Other Liability - Claims-Made						5,450	5,450		1,462	1,462		3,420
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	6,807	5,747		2,026	1,227	1,227	1,227		418	418	1,716	422
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	3,686	2,912		1,089	(25)	(25)	(25)		12	12	926	270
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						144	144		58	58		
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	10,493	13,173		3,114		8,090	8,090		1,978	1,978	2,642	1,724
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire						101	63		(12)	5		
2.1 Allied Lines	220	4,808		119		134	1,451		(73)	74	66	(18)
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)						23	79					
5.2 Commercial Multiple Peril (Liability Portion)	219	219		119							66	2
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						4						
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence						(13)	302		(24)	11		
17.2 Other Liability - Claims-Made	2,827,774	3,032,116		1,199,214	1,781,521	924,621	1,428,381	468,624	(460,260)	1,055,937	846,536	38,573
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence						(807)	399		(653)	1,187		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)	83	646			3,694	44,393	57,053		(72)	171	17	(3)
19.4 Other Commercial Auto Liability	7,601	61,958			12,834	(29,537)	129,789		(16,234)	25,642	1,520	(289)
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	631	4,571				(5,260)	(574)		217	934	126	(20)
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						(4)	14		(9)	5		
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	2,836,528	3,104,318		1,199,452	1,798,050	933,655	1,616,955	468,624	(477,120)	1,083,966	848,331	38,245
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	731	15,132		459		931	4,256		(108)	78	201	765
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril						5,636	5,636		283	283		
5.1 Commercial Multiple Peril (Non-Liability Portion)					30	95			(1)			
5.2 Commercial Multiple Peril (Liability Portion)		47			167	184			9	21		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine		23				43			(30)	8		
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake		3				(3)	1					
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	6,014	20,463		248		19,929	58,019		(2,055)	16,429	1,495	123
17.2 Other Liability - Claims-Made	8,253,099	8,673,557		3,238,601	2,853,438	2,732,949	5,349,417	1,092,260	485,376	3,962,128	2,392,150	169,376
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence		5,335			8,804	(7,919)	74,377	5,418	(96,851)	44,034		
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)		85				(208)	299		(8)	77	6	
19.4 Other Commercial Auto Liability		1,059				(3,423)	5,822		(183)	1,529	219	
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage		503				(147)	107		(15)	133	51	
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						(3,284)	1,270		(710)	578		
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	8,259,844	8,716,205		3,239,308	2,862,243	2,744,702	5,499,485	1,097,678	385,706	4,025,298	2,394,121	170,264
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire						(8)	2		3	4		
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					3	6			(3)	3		
5.2 Commercial Multiple Peril (Liability Portion)					(6)	23			(4)	7		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence						(4)	3		(1)	1		
17.2 Other Liability - Claims-Made	722,192	786,673		307,694	182,921	105,994	416,825	23,471	(91,177)	238,504	216,205	14,882
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	(801)	5,118				(14,283)	10,601		(1,417)	3,020	(160)	(16)
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage						109	(204)		(59)	572		
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery						1	1					
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	721,391	791,791		307,694	182,921	91,805	427,256	23,471	(92,659)	242,111	216,044	14,866
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines	2,950	3,877		2,827		133	1,095		(43)	19	.811	.31
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)					2	11						
5.2	Commercial Multiple Peril (Liability Portion)					(45)	19	6,095		6,092	5		
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine						291	(2)		(156)	61		
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	1	191			(435)	946			(219)	393		(6)
17.2	Other Liability - Claims-Made	1,857,328	1,989,320		730,491	49,542	1,189,128	190,128		(66,652)	704,341	553,431	57,540
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	27	27			(1,191)	2,166			(258)	916	6	(21)
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												2
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability	14,827				1,025,424	(179,296)	85,115	10,887	(115,840)	33,245		(324)
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage	10,001				52,280	(24,082)	(2,637)		(850)	5,244		(196)
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft					3	3			3	3		56
27.	Boiler and Machinery					1	1						
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	1,860,306	2,018,244		733,318	1,290,800	(155,076)	1,275,844	207,110	(177,923)	744,227	554,248	57,083
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines						(45)	15		(5)	2		
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)					1		3					
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence					(825)	4,380			(1,278)	613		
17.2	Other Liability - Claims-Made	455,264	470,851		194,166	15,000	20,441	241,278	14,188	(50,112)	134,085	136,136	12,202
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence												
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability					(53)	182			(10)	23		
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage					(4)				3	3		
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	455,264	470,851		194,166	15,000	19,514	245,859	14,188	(51,401)	134,725	136,136	12,202
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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						(76)	85		(19)	24		
2.1	Allied Lines .....	.988	7,182		.947		183	2,249		(98)	93	.272	(3)
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)					19		45		(2)	1		
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake						6	(1)		(4)	2		
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	52,224	23,936		28,288		4,636	8,845		396	3,463	19,578	1,410
17.2	Other Liability - Claims-Made	4,023,780	4,426,251		1,680,305	318,052	406,183	2,867,495	365,531	84,620	1,891,205	1,167,708	98,975
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence						1	3		(1)	1		
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability		3,680				(48,861)	231,097	1,132	1,957	25,040		(16)
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage		3,820				(137)	(783)		(80)	1,646		(32)
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft	3,528	6,413		735		(58)	1,959		44	625	1,058	82
27.	Boiler and Machinery						138	138		(2)	1		
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	4,080,520	4,471,282		1,710,275	318,052	362,034	3,111,133	366,662	86,811	1,922,100	1,182,616	100,416
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	52,899	68,295		45,020		(18,316)	25,700		(2,404)	1,648	14,547	(106)
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril						2,017	2,017		109	109		
5.1 Commercial Multiple Peril (Non-Liability Portion)	463	520			11	552			(1)	12	81	7,514
5.2 Commercial Multiple Peril (Liability Portion)	1,418	1,418			106	799			(64)	205	425	23
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine					10,066	14,619	16		(647)	320		
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation					18,206	(3,218)	64,417	17	(1,128)	1,323		
17.1 Other Liability - Occurrence	113,603	77,793		70,582	530,000	416,604	221,663	36,403	2,853	33,403	16,488	1,431
17.2 Other Liability - Claims-Made	14,570,204	15,823,181		6,264,525	4,464,686	5,500,538	24,311,172	5,065,861	2,252,724	8,682,121	4,169,311	109,804
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence	3,474	21,855		5,836		4,070	18,812		642	6,986	492	(154)
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)	354	724		105		(3,947)	2,897		(405)	849	93	(14)
19.4 Other Commercial Auto Liability	53,604	255,928		8,404	134,432	(321,841)	1,414,477	71,421	63,415	210,461	10,886	(4,138)
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	57,335	132,098		1,786	206,879	79,212	10,629		175	10,019	9,248	(640)
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft	3,975	3,975		166	(17,722)	(19,406)	1,900		(369)	685	1,193	36
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	14,857,329	16,385,787		6,396,423	5,346,546	5,650,448	26,075,050	5,173,702	2,314,899	8,948,141	4,222,763	113,756
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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												
2.1	Allied Lines	7,594	2,317		7,278		11	630		(32)	14	2,088	171
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)					29	70			(2)	1		
5.2	Commercial Multiple Peril (Liability Portion)					(2,113)	4,745			(921)	1,415		
6.	Mortgage Guaranty												
8.	Ocean Marine						(6)	1		(1)			
9.1	Inland Marine						4			(10)	6		
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	122,488	112,899		83,896		19,228	71,318		3,834	27,688	28,323	2,756
17.2	Other Liability - Claims-Made	2,722,240	3,022,284		1,157,756	504,912	22,598	1,543,348	335,359	202,926	1,237,559	808,381	62,184
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence												
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability							1,151		(209)	308		
19.3	Commercial Auto No-Fault (Personal Injury Protection)		260				(1,699)	48,031	33,378	4,051	13,129		
19.4	Other Commercial Auto Liability		8,671			200,000							
21.1	Private Passenger Auto Physical Damage						71	(545)		(341)	1,684		
21.2	Commercial Auto Physical Damage		1,314										
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft	2,551	2,551		2,232		(732)	1,009		(182)	378	765	57
27.	Boiler and Machinery						88						
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	2,854,873	3,150,296		1,251,162	704,912	113,993	1,669,844	368,737	209,114	1,282,182	839,558	65,169
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		101				(24)	35		(9)	1		
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence						(70)	5		(35)	29		
17.2 Other Liability - Claims-Made	19,558	21,037		10,710		(13,981)	26,068		(11,302)	14,917	5,867	391
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability						(73)	48		(15)	15		
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage						(3)			13	13		
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	19,558	21,138		10,710		(14,151)	26,156		(11,348)	14,974	5,867	391
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	23,868	1,347		22,530	4	562	563	1	32	32	5,966	537
2.1	Allied Lines	144,697	16,568		133,508	2	3,494	4,977		123	207	36,410	3,279
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril							2					
5.1	Commercial Multiple Peril (Non-Liability Portion)		145,317				60,354	61,074		3,276	3,336		7
5.2	Commercial Multiple Peril (Liability Portion)						(48)	47		(13)	8		
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine						8	4		(10)	4		
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence	1			(1)		(1,765)	8,644		(2,265)	1,614		
17.2	Other Liability - Claims-Made	156,977	236,596		123,334		(244,012)	1,422,615		(71,260)	347,857	47,093	3,550
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence						(1)	3		(2)	3		
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												14
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability		4,213				(8,287)	7,629		(616)	1,986		
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage		414				(6)	(124)		2	302		
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	325,543	404,455		279,371	5	(189,701)	1,505,435	1	(70,734)	355,350	89,469	7,387
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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						26	16		(5)	1		
2.1	Allied Lines	7,965	7,675		6,584		194	2,113		(90)	180	2,213	159
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril						2,096	2,096		135	135		
5.1	Commercial Multiple Peril (Non-Liability Portion)					(203)	287			(3)	14		
5.2	Commercial Multiple Peril (Liability Portion)	892	954		266	(88)	183			(16)	24	268	18
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability - Occurrence		113				116	1,595		(84)	304		
17.2	Other Liability - Claims-Made	6,022,867	6,891,383		2,382,201	1,765,661	1,068,731	4,480,326	5,034,722	2,730,948	2,929,669	1,806,860	127,885
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence							2			1		
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)						(9)						
19.4	Other Commercial Auto Liability	9,325	18,191		373	50,000	(21,405)	29,474		(3,155)	8,159	2,421	195
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage	1,946	11,326		68	1,000	224	(590)		(133)	1,038	503	54
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft						(930)	347		(248)	167		
27.	Boiler and Machinery						(3)						
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	6,042,995	6,929,641		2,389,493	1,816,661	1,048,751	4,515,849	5,034,722	2,727,348	2,939,691	1,812,264	128,312
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		2,376				244	668		(31)	21		(1)
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					(246)	(17)			(15)	15		
5.2 Commercial Multiple Peril (Liability Portion)					(125)	168			(31)	49		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						245	5		(164)	114		
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake						1						
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence					(4,671)	9,448			(3,102)	1,517		
17.2 Other Liability - Claims-Made	43,816	41,969		17,362	(31,416)	53,611			(10,125)	21,272	12,377	2,856
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability	(4,335)	1,081		523	4,426	(77,787)	89,931		7,228	37,664	(718)	(175)
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage	(3,711)	3,487		668	101,831	(62,156)	(2,024)		(874)	5,564	(569)	(170)
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						30	30		(1)			
27. Boiler and Machinery						200	200		(1)			
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	35,770	48,913		18,553	106,256	(175,681)	152,020		(7,118)	66,214	11,090	2,510
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire						(56)	18		(4)	2		597
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					22	84						
5.2 Commercial Multiple Peril (Liability Portion)					(8)	6			(1)	1		
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine						110			(48)			
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence					(627)	2,384			(475)	808		
17.2 Other Liability - Claims-Made	4,507	1,315		3,192	(19,212)	325,460	5,425		(61,482)	126,778	1,352	68
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability					(592)	512			(87)	188		
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage					(5)				9	12		
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft							3		(8)	4		
27. Boiler and Machinery						2	2					
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	4,507	1,315		3,192	(20,365)	328,468	5,425		(62,096)	127,793	1,352	664
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024

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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines		223				85	92		(45)	6		1
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)					19		2		(6)	1		
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake						2	1		(1)			
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	32,093	29,353		22,733		4,560	19,897		391	7,482	7,060	521
17.2 Other Liability - Claims-Made	191,102	187,133		76,273		32,110	101,799		31,675	135,131	44,675	3,030
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability						(1,644)	1,365		27	104		
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage						(6)	3		(38)	74		
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft						34	34					
27. Boiler and Machinery						718	718		(1)			
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	223,195	216,709		99,006		35,877	123,912		32,001	142,796	51,735	3,551
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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

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ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence												
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												1,050
24. Surety												250
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)												1,300
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ and number of persons insured under indemnity only products

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	22,515	21,388		1,127		22,041	22,041		6,375	6,375	5,866	916
17.2 Other Liability - Claims-Made .....						.466	.466		5	5		
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence	259	162		97		55	55		16	16	67	13
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	22,774	21,550		1,224		22,562	22,562		6,396	6,396	5,934	929
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence												200
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)												200
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ and number of persons insured under indemnity only products

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire						(5)	1		(1)			
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence												
17.2 Other Liability - Claims-Made						39,244	2,303,813		(94,073)	571,043		
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)						39,238	2,303,814		(94,073)	571,043		
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ and number of persons insured under indemnity only products

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024 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	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines	397,664	393,677		149,842		119,260	193,335		(378)	4,011	136,200	131
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4. Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b).....												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence												
17.2 Other Liability - Claims-Made						(104,672)	2,169,740		(12,643)	267,267		
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	397,664	393,677		149,842		14,587	2,363,074		(13,021)	271,278	136,200	131
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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



ANNUAL STATEMENT FOR THE YEAR 2024 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 2024								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	2,160,205	1,528,934		1,378,066	844,359	762,786	2,498,431	(74,359)	(89,020)	61,093	421,930	14,884
2.1	Allied Lines	4,168,121	4,089,431		2,078,313	295,572	4,171,402	6,882,410	50,573	100,055	243,842	1,056,694	21,125
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	15,740	15,404		6,441		4,515	23,724		(474)	1,045	4,132	335
3.	Farmowners Multiple Peril	41,082	30,285		34,392	143	(478)	2,111	6	94	339	8,545	102
4.	Homeowners Multiple Peril	2,269,264	2,232,946		1,207,218	450,066	377,524	742,188	72,304	126,707	99,691	547,654	4,245
5.1	Commercial Multiple Peril (Non-Liability Portion)	4,945,337	5,523,145		2,436,629	2,952,928	828,812	18,288,521	40,885	25,208	269,268	1,128,768	16,030
5.2	Commercial Multiple Peril (Liability Portion)	4,124,060	4,704,277		1,696,853	5,657,517	4,616,788	16,164,035	377,158	(267,870)	3,049,435	915,837	1,883
6.	Mortgage Guaranty												
8.	Ocean Marine	40,523	189,371		2,346		(20,405)	30,485		(301)	2,066	12,259	19
9.1	Inland Marine	4,360,186	5,270,316		1,418,695	587,538	1,278,650	2,008,935	81,314	33,895	123,805	1,125,716	81,494
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	36,039	40,598		14,602		(3,249)	6,100		186	804	9,545	836
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation					18,206	(3,218)	64,417	17	(1,128)	1,323		200
17.1	Other Liability - Occurrence	28,213,006	24,661,087		16,149,553	43,477,985	7,858,378	96,416,334	2,636,187	1,917,787	11,259,564	5,734,632	436,915
17.2	Other Liability - Claims-Made	163,387,103	173,804,505		72,791,541	40,174,261	38,599,919	134,147,066	33,257,306	10,552,939	77,139,298	47,374,033	2,950,369
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	2,636,954	1,417,818		1,545,798	397,814	1,657,411	5,363,040	506,678	977,076	2,788,710	461,382	17,434
18.2	Products Liability - Claims-Made	482,434	424,787		174,337		263	263		48	48	144,419	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												16
19.3	Commercial Auto No-Fault (Personal Injury Protection)	2,954	9,054		598	(436)	(1,934)	87,528	20,948	5,616	8,911	760	(67)
19.4	Other Commercial Auto Liability	2,079,305	5,584,964		1,256,475	28,995,892	2,050,403	33,046,247	2,541,046	903,162	4,425,360	460,070	108,410
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage	186,635	1,115,448		94,849	1,625,057	523,108	68,522	215,820	(57,609)	515,358	54,930	4,323
22.	Aircraft (all perils)												
23.	Fidelity												1,050
24.	Surety	2,424	3,904		490	5,435	5,895	861		573	870	727	251
26.	Burglary and Theft	46,239	44,680		19,601	(19,412)	(32,090)	16,718		(2,822)	5,999	13,693	948
27.	Boiler and Machinery	169,664	194,105		70,584	4,571	37,144	43,163	4,128	5,030	4,368	42,370	1,843
28.	Credit												
29.	International												
30.	Warranty		987		3,108								
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	Total (a)	219,367,277	230,886,046		102,380,492	125,467,497	62,711,626	315,901,098	39,730,009	14,229,152	100,001,198	59,518,097	3,662,644
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 505
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 1

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

1	2	3	4	5	Reinsurance On		8	9	10	11	12	13	14	15
					6	7								
ID Number	NAIC Com- pany Code	Name of Reinsured	Domiciliary Jurisdiction	Assumed Premium	Paid Losses and Loss Adjustment Expenses	Known Case Losses and LAE	Cols. 6 + 7	Contingent Commissions Payable	Assumed Premiums Receivable	Unearned Premium	Funds Held By or Deposited With Reinsured Companies	Letters of Credit Posted	Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	Amount of Assets Pledged or Collateral Held in Trust
0499999. Total - U.S. Non-Pool														
0799999. Total - Other (Non-U.S.)														
0899999. Total - Affiliates														
AA-9991105	.00000	California Commercial Auto Ins Procedure	CA.....	89		174	174			41	69			
AA-9991107	.00000	Colorado Commercial Auto Ins Procedure	CO.....			1	1							
AA-9991115	.00000	Illinois Commercial Auto Ins Procedure	IL.....	19		63	63			12	11			
AA-9991117	.00000	Indiana Commercial Auto Ins Procedure	IN.....	8		52	52			5	5			
AA-9991118	.00000	Iowa Commercial Auto Ins Procedure	IA.....	11		135	135			5	35			
AA-9991119	.00000	Kansas Commercial Auto Ins Procedure	KS.....	1		4	4			1	1			
AA-9991210	.00000	Kentucky Fair Plan	KY.....	1										
AA-9991211	.00000	Louisiana Fair Plan	LA.....	1						1				
AA-9991215	.00000	Minnesota Fair Plan	MN.....	1		1	1							
AA-9990014	.00000	Missouri Commercial Auto Ins Procedure	MO.....			3	3				1			
AA-9991130	.00000	Nebraska Commercial Auto Ins Procedure	NE.....	1		2	2				1			
AA-9991131	.00000	Nevada Commercial Auto Ins Procedure	NV.....	1		1	1							
AA-0000000	.00000	New York Commercial Auto Ins Procedure	NY.....								(1)			
AA-9991137	.00000	New York Special Risk Dsitribution Progr	NY.....			5	5				1			
AA-9991139	.00000	North Carolina Reins Facility	NC.....	(16)		2	2							
AA-9991141	.00000	Ohio Commercial Auto Ins Procedure	OH.....	8		27	27			6	4			
AA-9991223	.00000	Oregon Fair Plan	OR.....	1										
AA-9991146	.00000	Rhode Island Commercial Auto Ins Procedure	RI.....	2		1	1			1	1			
AA-9991225	.00000	Rhode Island Joint Reins Assn	RI.....			1	1							
57-0629683	.34134	South Carolina Wind & Hail Underwriting	SC.....	2						13				
AA-9991151	.00000	Utah Commercial Auto Ins Procedure	UT.....			1	1							
AA-9991156	.00000	West Virginia Commercial Auto Ins Proced	WV.....	1		4	4				1			
1099999. Total Pools, Associations or Other Similar Facilities - Mandatory Pools				131		477	477			85	129			
1299999. Total - Pools and Associations				131		477	477			85	129			
9999999 Totals				131		477	477			85	129			

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectuated or (Canceled) during Current Year	2019	2018
Reinsurance Effectuated	100	100
Reinsurance Canceled	0	0
Total	100	100

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
31-1024978	.41297	Scottsdale Insurance Company	OH		219,495	9,121	4,769	144,769	33,324	176,308	83,904	102,465		554,660		29,246		525,414	129
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other					219,495	9,121	4,769	144,769	33,324	176,308	83,904	102,465		554,660		29,246		525,414	129
0499999. Total Authorized - Affiliates - U.S. Non-Pool					219,495	9,121	4,769	144,769	33,324	176,308	83,904	102,465		554,660		29,246		525,414	129
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																			
0899999. Total Authorized - Affiliates					219,495	9,121	4,769	144,769	33,324	176,308	83,904	102,465		554,660		29,246		525,414	129
AA-9991159	.00000	Michigan Claims Cat Fund	MI		3											3		(3)	
1099999. Total Authorized - Pools - Mandatory Pools					3											3		(3)	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					219,498	9,121	4,769	144,769	33,324	176,308	83,904	102,465		554,660		29,249		525,411	129
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																			
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																			
2299999. Total Unauthorized - Affiliates																			
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																			
3299999. Total Certified - Affiliates - U.S. Non-Pool																			
3599999. Total Certified - Affiliates - Other (Non-U.S.)																			
3699999. Total Certified - Affiliates																			
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																			
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																			
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																			
5099999. Total Reciprocal Jurisdiction - Affiliates																			
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																			
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					219,498	9,121	4,769	144,769	33,324	176,308	83,904	102,465		554,660		29,249		525,411	129
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																			
9999999 Totals					219,498	9,121	4,769	144,769	33,324	176,308	83,904	102,465		554,660		29,249		525,411	129

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

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ANNUAL STATEMENT FOR THE YEAR 2024 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 Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37 Current	Overdue					43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)											
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41												
31-1024978 ..	Scottsdale Insurance Company	13,890						13,890			13,890							YES.....	
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other		13,890						13,890			13,890							XXX	
0499999. Total Authorized - Affiliates - U.S. Non-Pool		13,890						13,890			13,890							XXX	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																		XXX	
0899999. Total Authorized - Affiliates		13,890						13,890			13,890							XXX	
AA-9991159 ..	Michigan Claims Cat Fund																	YES.....	
1099999. Total Authorized - Pools - Mandatory Pools																		XXX	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		13,890						13,890			13,890							XXX	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																		XXX	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																		XXX	
2299999. Total Unauthorized - Affiliates																		XXX	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																		XXX	
3299999. Total Certified - Affiliates - U.S. Non-Pool																		XXX	
3599999. Total Certified - Affiliates - Other (Non-U.S.)																		XXX	
3699999. Total Certified - Affiliates																		XXX	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																		XXX	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																		XXX	
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																		XXX	
5099999. Total Reciprocal Jurisdiction - Affiliates																		XXX	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																		XXX	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		13,890						13,890			13,890							XXX	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																		XXX	
9999999 Totals		13,890						13,890			13,890							XXX	

SCHEDULE F - PART 3 (Continued)

Provision for Certified Reinsurance

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															
		54 Certified Reinsurer Rating (1 through 6)	55 Effective Date of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophe Recoverables Qualifying for Collateral Deferral	58 Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63 Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	65 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
														66 Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	68 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
03999999. Total Authorized - Affiliates - U.S. Non-Pool - Other				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
04999999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
07999999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
08999999. Total Authorized - Affiliates				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
10999999. Total Authorized - Pools - Mandatory Pools				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
14999999. Total Authorized Excluding Protected Cells (Sum of 08999999, 09999999, 10999999, 11999999 and 12999999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
18999999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
21999999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
22999999. Total Unauthorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
28999999. Total Unauthorized Excluding Protected Cells (Sum of 22999999, 23999999, 24999999, 25999999 and 26999999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32999999. Total Certified - Affiliates - U.S. Non-Pool				XXX				XXX	XXX								
35999999. Total Certified - Affiliates - Other (Non-U.S.)				XXX				XXX	XXX								
36999999. Total Certified - Affiliates				XXX				XXX	XXX								
42999999. Total Certified Excluding Protected Cells (Sum of 36999999, 37999999, 38999999, 39999999 and 40999999)				XXX				XXX	XXX								
46999999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
49999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
50999999. Total Reciprocal Jurisdiction - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
56999999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 50999999, 51999999, 52999999, 53999999 and 54999999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
57999999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 14999999, 28999999, 42999999 and 56999999)				XXX				XXX	XXX								
58999999. Total Protected Cells (Sum of 13999999, 27999999, 41999999 and 55999999)				XXX				XXX	XXX								
99999999 Totals				XXX				XXX	XXX								

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

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE F - PART 4

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2024 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:

	1	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.	0.000	.....
2.	0.000	.....
3.	0.000	.....
4.	0.000	.....
5.	0.000	.....

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

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
6.	Scottsdale Insurance Company	554,660	219,495	Yes [X] No []
7.	Yes [] No []
8.	Yes [] No []
9.	Yes [] No []
10.	Yes [] No []

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	38,367,044		38,367,044
2. Premiums and considerations (Line 15)	12,079,747		12,079,747
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	13,890,254	(13,890,254)	1
4. Funds held by or deposited with reinsured companies (Line 16.2)	128,764		128,764
5. Other assets	7,568,661		7,568,661
6. Net amount recoverable from reinsurers		525,286,751	525,286,751
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	72,034,470	511,396,498	583,430,968
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	57	438,305,307	438,305,364
10. Taxes, expenses, and other obligations (Lines 4 through 8)	231,379	30	231,409
11. Unearned premiums (Line 9)		102,465,252	102,465,252
12. Advance premiums (Line 10)			
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	29,248,669	(29,245,327)	3,342
15. Funds held by company under reinsurance treaties (Line 13)	128,764	(128,764)	
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)			
18. Other liabilities	3,890,669		3,890,669
19. Total liabilities excluding protected cell business (Line 26)	33,499,538	511,396,498	544,896,036
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	38,534,932	XXX	38,534,932
22. Totals (Line 38)	72,034,470	511,396,498	583,430,968

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? Yes [X] 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 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....
2. 2015.....	1,314.....	1,314.....		295.....	295.....	2.....	2.....	35.....	35.....			31.....
3. 2016.....	1,390.....	1,390.....		270.....	270.....	7.....	7.....	37.....	37.....			22.....
4. 2017.....	1,448.....	1,448.....		986.....	986.....	19.....	19.....	47.....	47.....			14.....
5. 2018.....	1,487.....	1,487.....		502.....	502.....	14.....	14.....	46.....	46.....			18.....
6. 2019.....	1,631.....	1,631.....		812.....	812.....	5.....	5.....	68.....	68.....			21.....
7. 2020.....	1,865.....	1,865.....		1,118.....	1,118.....	143.....	143.....	61.....	61.....			30.....
8. 2021.....	2,518.....	2,518.....		673.....	673.....	9.....	9.....	54.....	54.....			57.....
9. 2022.....	2,850.....	2,850.....		1,906.....	1,906.....	79.....	79.....	61.....	61.....			53.....
10. 2023.....	2,621.....	2,621.....		1,290.....	1,290.....	62.....	62.....	99.....	99.....			29.....
11. 2024.....	2,263.....	2,263.....		106.....	106.....			23.....	23.....			13.....
12. Totals.....	XXX.....	XXX.....	XXX.....	7,959.....	7,959.....	341.....	341.....	531.....	531.....			XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	(40)	(40)					(6)	(6)					29
2. 2015.....	(4)	(4)	(1)	(1)			(1)	(1)					
3. 2016.....	(1)	(1)											
4. 2017.....	63	63	4	4			13	13					
5. 2018.....			(3)	(3)									
6. 2019.....			(2)	(2)									
7. 2020.....			(3)	(3)					3	3			
8. 2021.....			(6)	(6)									
9. 2022.....	158	158	56	56	12	12	2	2	11	11			
10. 2023.....	209	209	205	205	34	34	35	35	36	36			1
11. 2024.....	25	25	105	105	3	3	13	13	32	32			1
12. Totals	411	411	355	355	49	49	57	57	83	83			31

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....
2. 2015.....	327.....	327.....	.....	24.9.....	24.9.....	.....	.....	.....	.....	.....	.....
3. 2016.....	313.....	313.....	.....	22.5.....	22.5.....	.....	.....	.....	.....	.....	.....
4. 2017.....	1,133.....	1,133.....	.....	78.2.....	78.2.....	.....	.....	.....	.....	.....	.....
5. 2018.....	560.....	560.....	.....	37.7.....	37.7.....	.....	.....	.....	.....	.....	.....
6. 2019.....	884.....	884.....	.....	54.2.....	54.2.....	.....	.....	.....	.....	.....	.....
7. 2020.....	1,322.....	1,322.....	.....	70.9.....	70.9.....	.....	.....	.....	.....	.....	.....
8. 2021.....	730.....	730.....	.....	29.0.....	29.0.....	.....	.....	.....	.....	.....	.....
9. 2022.....	2,286.....	2,286.....	.....	80.2.....	80.2.....	.....	.....	.....	.....	.....	.....
10. 2023.....	1,969.....	1,969.....	.....	75.1.....	75.1.....	.....	.....	.....	.....	.....	.....
11. 2024.....	308.....	308.....	.....	13.6.....	13.6.....	.....	.....	.....	.....	.....	.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2015.....												
3. 2016.....								1	1			
4. 2017.....								17	17			
5. 2018.....												
6. 2019.....												
7. 2020.....												
8. 2021.....	1	1										
9. 2022.....												
10. 2023.....								6	6			
11. 2024.....												
12. Totals	XXX	XXX	XXX					24	24			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015.....											
3. 2016.....	1	1									
4. 2017.....	17	17									
5. 2018.....											
6. 2019.....											
7. 2020.....											
8. 2021.....											
9. 2022.....											
10. 2023.....	6	6		3,437.6	3,437.6						
11. 2024.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 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	
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	256.....	256.....	156.....	156.....	43.....	43.....			XXX.....
2. 2015.....	34,527.....	34,527.....		32,314.....	32,314.....	1,812.....	1,812.....	1,888.....	1,888.....			918.....
3. 2016.....	37,062.....	37,062.....		41,893.....	41,893.....	2,985.....	2,985.....	2,237.....	2,237.....			1,045.....
4. 2017.....	40,889.....	40,889.....		36,523.....	36,523.....	2,532.....	2,532.....	2,908.....	2,908.....			1,147.....
5. 2018.....	38,830.....	38,830.....		27,221.....	27,221.....	1,761.....	1,761.....	1,709.....	1,709.....			935.....
6. 2019.....	44,395.....	44,395.....		35,775.....	35,775.....	2,212.....	2,212.....	1,909.....	1,909.....			988.....
7. 2020.....	44,124.....	44,124.....		24,253.....	24,253.....	2,802.....	2,802.....	1,805.....	1,805.....			649.....
8. 2021.....	52,725.....	52,725.....		34,202.....	34,202.....	2,588.....	2,588.....	2,011.....	2,011.....			835.....
9. 2022.....	45,935.....	45,935.....		20,787.....	20,787.....	1,510.....	1,510.....	2,066.....	2,066.....			644.....
10. 2023.....	27,211.....	27,211.....		6,743.....	6,743.....	380.....	380.....	1,583.....	1,583.....			347.....
11. 2024.....	5,737.....	5,737.....		1,732.....	1,732.....	51.....	51.....	546.....	546.....			53.....
12. Totals	XXX	XXX	XXX	261,699	261,699	18,789	18,789	18,704	18,704			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....			6.....	6.....	(2).....	(2).....	(1).....	(1).....	16.....	16.....			1,595.....
2. 2015.....					(6).....	(6).....	2.....	2.....	(13).....	(13).....			
3. 2016.....	1,005.....	1,005.....	4.....	4.....	86.....	86.....	8.....	8.....	206.....	206.....			
4. 2017.....	(2).....	(2).....	107.....	107.....	(7).....	(7).....	31.....	31.....	32.....	32.....			
5. 2018.....	399.....	399.....	115.....	115.....	40.....	40.....	39.....	39.....	52.....	52.....			
6. 2019.....	732.....	732.....	277.....	277.....	109.....	109.....	90.....	90.....	108.....	108.....			2.....
7. 2020.....	3,655.....	3,655.....	814.....	814.....	85.....	85.....	165.....	165.....	87.....	87.....			4.....
8. 2021.....	4,841.....	4,841.....	1,519.....	1,519.....	206.....	206.....	599.....	599.....	227.....	227.....			9.....
9. 2022.....	6,117.....	6,117.....	3,985.....	3,985.....	641.....	641.....	1,021.....	1,021.....	384.....	384.....			24.....
10. 2023.....	2,447.....	2,447.....	5,045.....	5,045.....	186.....	186.....	887.....	887.....	346.....	346.....			32.....
11. 2024.....	649.....	649.....	2,078.....	2,078.....	40.....	40.....	262.....	262.....	135.....	135.....			11.....
12. Totals	19,841	19,841	13,949	13,949	1,378	1,378	3,102	3,102	1,580	1,580			1,677

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....	35,998.....	35,998.....		104.3.....	104.3.....						
3. 2016.....	48,423.....	48,423.....		130.7.....	130.7.....						
4. 2017.....	42,124.....	42,124.....		103.0.....	103.0.....						
5. 2018.....	31,335.....	31,335.....		80.7.....	80.7.....						
6. 2019.....	41,212.....	41,212.....		92.8.....	92.8.....						
7. 2020.....	33,665.....	33,665.....		76.3.....	76.3.....						
8. 2021.....	46,193.....	46,193.....		87.6.....	87.6.....						
9. 2022.....	36,510.....	36,510.....		79.5.....	79.5.....						
10. 2023.....	17,616.....	17,616.....		64.7.....	64.7.....						
11. 2024.....	5,494.....	5,494.....		95.7.....	95.7.....						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	18.....	18.....							XXX.....
2. 2015.....												
3. 2016.....												
4. 2017.....												
5. 2018.....	89.....	89.....		101.....	101.....	27.....	27.....	16.....	16.....			11.....
6. 2019.....	132.....	132.....		2.....	2.....			3.....	3.....			4.....
7. 2020.....	9.....	9.....						9.....	9.....			2.....
8. 2021.....	(1).....	(1).....										
9. 2022.....												
10. 2023.....												
11. 2024.....												
12. Totals	XXX	XXX	XXX	121	121	27	27	28	28			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid		Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	60	60											2
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....			1	1									
6. 2019.....			3	3			1	1					
7. 2020.....			1	1									
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
12. Totals	60	60	5	5			1	1					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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015.....											
3. 2016.....											
4. 2017.....											
5. 2018.....	146	146		163.7	163.7						
6. 2019.....	9	9		6.7	6.7						
7. 2020.....	10	10		108.0	108.0						
8. 2021.....											
9. 2022.....											
10. 2023.....											
11. 2024.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	247.....	247.....	29.....	29.....	642.....	642.....			XXX.....
2. 2015.....	14,808.....	14,808.....		7,194.....	7,194.....	984.....	984.....	1,492.....	1,492.....			241.....
3. 2016.....	16,069.....	16,069.....		12,638.....	12,638.....	837.....	837.....	1,037.....	1,037.....			246.....
4. 2017.....	16,405.....	16,405.....		38,285.....	38,285.....	1,276.....	1,276.....	4,459.....	4,459.....			257.....
5. 2018.....	17,047.....	17,047.....		39,514.....	39,514.....	873.....	873.....	3,474.....	3,474.....			329.....
6. 2019.....	18,676.....	18,676.....		14,289.....	14,289.....	361.....	361.....	4,569.....	4,569.....			287.....
7. 2020.....	17,698.....	17,698.....		14,393.....	14,393.....	267.....	267.....	1,699.....	1,699.....			199.....
8. 2021.....	15,517.....	15,517.....		6,351.....	6,351.....	625.....	625.....	996.....	996.....			193.....
9. 2022.....	16,938.....	16,938.....		5,645.....	5,645.....	291.....	291.....	596.....	596.....			188.....
10. 2023.....	16,557.....	16,557.....		4,770.....	4,770.....	40.....	40.....	806.....	806.....			159.....
11. 2024.....	10,227.....	10,227.....		2,238.....	2,238.....	49.....	49.....	216.....	216.....			71.....
12. Totals.....	XXX.....	XXX.....	XXX.....	145,564.....	145,564.....	5,631.....	5,631.....	19,985.....	19,985.....			XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	150.....	150.....	63.....	63.....	21.....	21.....	6.....	6.....	176.....	176.....			365.....
2. 2015.....	200.....	200.....	141.....	141.....	11.....	11.....	9.....	9.....	75.....	75.....			
3. 2016.....			181.....	181.....	20.....	20.....	20.....	20.....	152.....	152.....			
4. 2017.....	13.....	13.....	268.....	268.....			41.....	41.....	185.....	185.....			
5. 2018.....	42.....	42.....	530.....	530.....	37.....	37.....	59.....	59.....	253.....	253.....			2.....
6. 2019.....	1,825.....	1,825.....	617.....	617.....	301.....	301.....	157.....	157.....	310.....	310.....			2.....
7. 2020.....	14,113.....	14,113.....	2,440.....	2,440.....	65.....	65.....	212.....	212.....	220.....	220.....			6.....
8. 2021.....	928.....	928.....	847.....	847.....	198.....	198.....	281.....	281.....	292.....	292.....			10.....
9. 2022.....	1,590.....	1,590.....	2,220.....	2,220.....	406.....	406.....	553.....	553.....	510.....	510.....			41.....
10. 2023.....	2,733.....	2,733.....	3,475.....	3,475.....	182.....	182.....	636.....	636.....	714.....	714.....			31.....
11. 2024.....	695.....	695.....	3,676.....	3,676.....	26.....	26.....	645.....	645.....	370.....	370.....			35.....
12. Totals.....	22,289.....	22,289.....	14,459.....	14,459.....	1,267.....	1,267.....	2,618.....	2,618.....	3,258.....	3,258.....			492.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....	10,108.....	10,108.....		68.3.....	68.3.....						
3. 2016.....	14,886.....	14,886.....		92.6.....	92.6.....						
4. 2017.....	44,526.....	44,526.....		271.4.....	271.4.....						
5. 2018.....	44,781.....	44,781.....		262.7.....	262.7.....						
6. 2019.....	22,430.....	22,430.....		120.1.....	120.1.....						
7. 2020.....	33,409.....	33,409.....		188.8.....	188.8.....						
8. 2021.....	10,517.....	10,517.....		67.8.....	67.8.....						
9. 2022.....	11,810.....	11,810.....		69.7.....	69.7.....						
10. 2023.....	13,356.....	13,356.....		80.7.....	80.7.....						
11. 2024.....	7,914.....	7,914.....		77.4.....	77.4.....						
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		

ANNUAL STATEMENT FOR THE YEAR 2024 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
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported Direct and Assumed
	Direct and Assumed	Ceded	Net (1 - 2)	4	5	6	7	8	9	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2015.....												
3. 2016.....												
4. 2017.....												
5. 2018.....												
6. 2019.....												
7. 2020.....												
8. 2021.....												
9. 2022.....												
10. 2023.....												
11. 2024.....												
12. Totals	XXX	XXX	XXX									XXX

NONE

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

NONE

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE 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
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....
2. 2015.....	(1).....	(1).....										
3. 2016.....												
4. 2017.....												
5. 2018.....												
6. 2019.....												
7. 2020.....												
8. 2021.....												
9. 2022.....												
10. 2023.....												
11. 2024.....												
12. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....											
3. 2016.....											
4. 2017.....											
5. 2018.....											
6. 2019.....											
7. 2020.....											
8. 2021.....											
9. 2022.....											
10. 2023.....											
11. 2024.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 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	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	Direct and Assumed	Ceded	Net (1 - 2)	4	5	6	7	8	9	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
1. Prior.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....
2. 2015.....	365.....	365.....	.....	4.....	4.....	.....	.....	3.....	3.....	.....	.....	XXX.....
3. 2016.....	394.....	394.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....
4. 2017.....	454.....	454.....	.....	31.....	31.....	.....	.....	1.....	1.....	.....	.....	XXX.....
5. 2018.....	418.....	418.....	.....	59.....	59.....	.....	.....	3.....	3.....	.....	.....	XXX.....
6. 2019.....	458.....	458.....	.....	83.....	83.....	.....	.....	1.....	1.....	.....	.....	XXX.....
7. 2020.....	548.....	548.....	.....	.....	.....	12.....	12.....	2.....	2.....	.....	.....	XXX.....
8. 2021.....	476.....	476.....	.....	.....	.....	.....	.....	1.....	1.....	.....	.....	XXX.....
9. 2022.....	446.....	446.....	.....	26.....	26.....	.....	.....	1.....	1.....	.....	.....	XXX.....
10. 2023.....	520.....	520.....	.....	33.....	33.....	.....	.....	1.....	1.....	.....	.....	XXX.....
11. 2024.....	383.....	383.....	.....	5.....	5.....	1.....	1.....	1.....	1.....	.....	.....	XXX.....
12. Totals.....	XXX.....	XXX.....	XXX.....	240.....	240.....	13.....	13.....	14.....	14.....	.....	.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													1
2. 2015.....			4	4									
3. 2016.....			4	4									
4. 2017.....													
5. 2018.....													
6. 2019.....					2	2			2	2			
7. 2020.....			4	4									
8. 2021.....			1	1									
9. 2022.....			3	3									
10. 2023.....			4	4			1	1	1	1			
11. 2024.....			52	52			3	3	4	4			
12. Totals			74	74	2	2	4	4	6	6			1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....
2. 2015.....	11.....	11.....	.....	3.1.....	3.1.....	.....	.....	.....	.....	.....	.....
3. 2016.....	4.....	4.....	.....	1.0.....	1.0.....	.....	.....	.....	.....	.....	.....
4. 2017.....	32.....	32.....	.....	7.0.....	7.0.....	.....	.....	.....	.....	.....	.....
5. 2018.....	62.....	62.....	.....	14.8.....	14.8.....	.....	.....	.....	.....	.....	.....
6. 2019.....	89.....	89.....	.....	19.4.....	19.4.....	.....	.....	.....	.....	.....	.....
7. 2020.....	18.....	18.....	.....	3.3.....	3.3.....	.....	.....	.....	.....	.....	.....
8. 2021.....	2.....	2.....	.....	0.4.....	0.4.....	.....	.....	.....	.....	.....	.....
9. 2022.....	30.....	30.....	.....	6.8.....	6.8.....	.....	.....	.....	.....	.....	.....
10. 2023.....	41.....	41.....	.....	7.8.....	7.8.....	.....	.....	.....	.....	.....	.....
11. 2024.....	65.....	65.....	.....	17.0.....	17.0.....	.....	.....	.....	.....	.....	.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	990.....	990.....	203.....	203.....	71.....	71.....			XXX.....
2. 2015.....	54,469.....	54,469.....		48,914.....	48,914.....	2,627.....	2,627.....	5,462.....	5,462.....			451.....
3. 2016.....	69,060.....	69,060.....		55,460.....	55,460.....	4,905.....	4,905.....	1,927.....	1,927.....			422.....
4. 2017.....	60,603.....	60,603.....		54,338.....	54,338.....	3,920.....	3,920.....	2,514.....	2,514.....			442.....
5. 2018.....	50,719.....	50,719.....		38,656.....	38,656.....	1,655.....	1,655.....	1,825.....	1,825.....			382.....
6. 2019.....	46,796.....	46,796.....		31,563.....	31,563.....	1,837.....	1,837.....	2,124.....	2,124.....			319.....
7. 2020.....	40,404.....	40,404.....		19,692.....	19,692.....	1,239.....	1,239.....	1,172.....	1,172.....			172.....
8. 2021.....	29,495.....	29,495.....		14,366.....	14,366.....	1,299.....	1,299.....	1,839.....	1,839.....			182.....
9. 2022.....	23,642.....	23,642.....		5,513.....	5,513.....	324.....	324.....	1,547.....	1,547.....			221.....
10. 2023.....	22,991.....	22,991.....		1,899.....	1,899.....	227.....	227.....	485.....	485.....			118.....
11. 2024.....	24,661.....	24,661.....		203.....	203.....	26.....	26.....	320.....	320.....			30.....
12. Totals	XXX	XXX	XXX	271,595	271,595	18,262	18,262	19,286	19,286			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	3,026	3,026	1,213	1,213	19	19	139	139	272	272			1,781
2. 2015.....	3,854	3,854	925	925	101	101	42	42	150	150			1
3. 2016.....	14,375	14,375	1,223	1,223	615	615	297	297	320	320			5
4. 2017.....	10,540	10,540	1,401	1,401	153	153	327	327	311	311			3
5. 2018.....	5,800	5,800	1,159	1,159	108	108	193	193	434	434			9
6. 2019.....	3,601	3,601	1,846	1,846	133	133	443	443	408	408			11
7. 2020.....	3,164	3,164	3,949	3,949	199	199	625	625	341	341			11
8. 2021.....	5,980	5,980	5,282	5,282	357	357	839	839	345	345			9
9. 2022.....	2,283	2,283	5,896	5,896	907	907	1,334	1,334	698	698			36
10. 2023.....	1,481	1,481	7,712	7,712	384	384	1,654	1,654	963	963			25
11. 2024.....	1,895	1,895	9,797	9,797	105	105	2,281	2,281	471	471			17
12. Totals	56,001	56,001	40,404	40,404	3,081	3,081	8,175	8,175	4,714	4,714			1,908

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....	62,074.....	62,074.....		114.0.....	114.0.....						
3. 2016.....	79,123.....	79,123.....		114.6.....	114.6.....						
4. 2017.....	73,505.....	73,505.....		121.3.....	121.3.....						
5. 2018.....	49,832.....	49,832.....		98.3.....	98.3.....						
6. 2019.....	41,954.....	41,954.....		89.7.....	89.7.....						
7. 2020.....	30,381.....	30,381.....		75.2.....	75.2.....						
8. 2021.....	30,307.....	30,307.....		102.8.....	102.8.....						
9. 2022.....	18,502.....	18,502.....		78.3.....	78.3.....						
10. 2023.....	14,805.....	14,805.....		64.4.....	64.4.....						
11. 2024.....	15,099.....	15,099.....		61.2.....	61.2.....						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....			198	198					XXX.....
2. 2015.....	108,988	108,988		30,396	30,396	15,681	15,681	2,893	2,893			323
3. 2016.....	115,523	115,523		31,953	31,953	19,711	19,711	2,229	2,229			288
4. 2017.....	116,744	116,744		29,788	29,788	26,606	26,606	1,817	1,817			275
5. 2018.....	118,601	118,601		32,344	32,344	31,237	31,237	1,922	1,922			330
6. 2019.....	116,367	116,367		37,080	37,080	29,158	29,158	4,190	4,190			346
7. 2020.....	129,165	129,165		29,868	29,868	29,598	29,598	2,899	2,899			355
8. 2021.....	169,374	169,374		36,934	36,934	24,638	24,638	3,161	3,161			343
9. 2022.....	200,514	200,514		28,454	28,454	26,064	26,064	8,352	8,352			320
10. 2023.....	195,299	195,299		19,865	19,865	11,228	11,228	2,730	2,730			289
11. 2024.....	173,805	173,805		5,610	5,610	3,112	3,112	1,010	1,010			198
12. Totals	XXX	XXX	XXX	282,290	282,290	217,231	217,231	31,203	31,203			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	10,000	10,000	2,521	2,521	194	194	230	230	8	8			597
2. 2015.....			1,001	1,001			88	88					
3. 2016.....	25	25	696	696	184	184	93	93					
4. 2017.....			933	933			599	599					
5. 2018.....	585	585	3,549	3,549	1,303	1,303	499	499	36	36			
6. 2019.....	3,040	3,040	3,966	3,966	716	716	1,677	1,677	97	97			2
7. 2020.....	1,160	1,160	4,518	4,518	799	799	1,359	1,359	115	115			2
8. 2021.....	1,768	1,768	9,277	9,277	3,756	3,756	3,069	3,069	430	430			5
9. 2022.....	4,156	4,156	16,360	16,360	4,137	4,137	7,262	7,262	722	722			34
10. 2023.....	6,493	6,493	21,817	21,817	5,538	5,538	15,471	15,471	1,203	1,203			97
11. 2024.....	8,781	8,781	35,724	35,724	7,786	7,786	22,640	22,640	3,205	3,205			137
12. Totals	36,007	36,007	100,362	100,362	24,413	24,413	52,987	52,987	5,817	5,817			874

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

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....
2. 2015.....	50,059	50,059	.....	45.9	45.9	.....	.....	.....	.....	.....	.....
3. 2016.....	54,891	54,891	.....	47.5	47.5	.....	.....	.....	.....	.....	.....
4. 2017.....	59,742	59,742	.....	51.2	51.2	.....	.....	.....	.....	.....	.....
5. 2018.....	71,474	71,474	.....	60.3	60.3	.....	.....	.....	.....	.....	.....
6. 2019.....	79,923	79,923	.....	68.7	68.7	.....	.....	.....	.....	.....	.....
7. 2020.....	70,317	70,317	.....	54.4	54.4	.....	.....	.....	.....	.....	.....
8. 2021.....	83,033	83,033	.....	49.0	49.0	.....	.....	.....	.....	.....	.....
9. 2022.....	95,507	95,507	.....	47.6	47.6	.....	.....	.....	.....	.....	.....
10. 2023.....	84,344	84,344	.....	43.2	43.2	.....	.....	.....	.....	.....	.....
11. 2024.....	87,868	87,868	.....	50.6	50.6	.....	.....	.....	.....	.....	.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	XXX	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(18)	(18)							XXX.....
2. 2015.....	8,827	8,827		3,520	3,520	83	83	282	282			XXX.....
3. 2016.....	9,686	9,686		3,634	3,634	46	46	334	334			XXX.....
4. 2017.....	10,447	10,447		3,955	3,955	72	72	343	343			XXX.....
5. 2018.....	10,066	10,066		3,992	3,992	74	74	562	562			XXX.....
6. 2019.....	8,967	8,967		3,669	3,669	30	30	663	663			XXX.....
7. 2020.....	9,541	9,541		8,041	8,041	49	49	627	627			XXX.....
8. 2021.....	12,094	12,094		5,344	5,344	172	172	407	407			XXX.....
9. 2022.....	12,120	12,120		3,530	3,530	64	64	378	378			XXX.....
10. 2023.....	12,049	12,049		3,064	3,064	69	69	305	305			XXX.....
11. 2024.....	10,981	10,981		1,030	1,030	52	52	151	151			XXX.....
12. Totals	XXX	XXX	XXX	39,760	39,760	711	711	4,052	4,052			XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	(5)	(5)					(1)	(1)	7	7			160
2. 2015.....	(3)	(3)											
3. 2016.....	53	53											
4. 2017.....	(54)	(54)											
5. 2018.....			(3)	(3)			1	1	4	4			
6. 2019.....			26	26			1	1	1	1			
7. 2020.....	3,191	3,191	323	323	7	7	11	11	32	32			
8. 2021.....	(3)	(3)	133	133			32	32	31	31			
9. 2022.....	14	14	456	456	1	1	38	38	25	25			
10. 2023.....	278	278	908	908	7	7	204	204	125	125			4
11. 2024.....	4,659	4,659	1,454	1,454	50	50	84	84	189	189			4
12. Totals	8,131	8,131	3,297	3,297	66	66	370	370	415	415			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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015.....	3,882	3,882		44.0	44.0						
3. 2016.....	4,067	4,067		42.0	42.0						
4. 2017.....	4,316	4,316		41.3	41.3						
5. 2018.....	4,630	4,630		46.0	46.0						
6. 2019.....	4,390	4,390		49.0	49.0						
7. 2020.....	12,281	12,281		128.7	128.7						
8. 2021.....	6,116	6,116		50.6	50.6						
9. 2022.....	4,505	4,505		37.2	37.2						
10. 2023.....	4,960	4,960		41.2	41.2						
11. 2024.....	7,669	7,669		69.8	69.8						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....
2. 2015.....	15,262.....	15,262.....		9,212.....	9,212.....	1,383.....	1,383.....	1,048.....	1,048.....			658.....
3. 2016.....	17,606.....	17,606.....		8,687.....	8,687.....	982.....	982.....	971.....	971.....			585.....
4. 2017.....	21,193.....	21,193.....		12,784.....	12,784.....	1,757.....	1,757.....	1,391.....	1,391.....			701.....
5. 2018.....	19,200.....	19,200.....		8,910.....	8,910.....	1,179.....	1,179.....	1,470.....	1,470.....			580.....
6. 2019.....	18,604.....	18,604.....		8,643.....	8,643.....	926.....	926.....	1,358.....	1,358.....			540.....
7. 2020.....	16,900.....	16,900.....		6,360.....	6,360.....	315.....	315.....	1,407.....	1,407.....			406.....
8. 2021.....	19,696.....	19,696.....		8,023.....	8,023.....	115.....	115.....	980.....	980.....			496.....
9. 2022.....	16,866.....	16,866.....		6,212.....	6,212.....	65.....	65.....	926.....	926.....			368.....
10. 2023.....	9,094.....	9,094.....		4,014.....	4,014.....	20.....	20.....	347.....	347.....			200.....
11. 2024.....	1,116.....	1,116.....		1,049.....	1,049.....	3.....	3.....	73.....	73.....			34.....
12. Totals.....	XXX.....	XXX.....	XXX.....	73,896.....	73,896.....	6,745.....	6,745.....	9,972.....	9,972.....			XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....							1	1	22	22			288
2. 2015.....					37	37							
3. 2016.....					1	1							
4. 2017.....					17	17	4	4	8	8			
5. 2018.....							2	2					
6. 2019.....			3	3	1	1	15	15	4	4			
7. 2020.....			115	115	1	1	21	21	6	6			
8. 2021.....			2	2	6	6	83	83	31	31			
9. 2022.....	3	3	(52)	(52)	6	6	168	168	58	58			2
10. 2023.....	4	4	(19)	(19)	1	1	128	128	83	83			
11. 2024.....	25	25	(13)	(13)	1	1	23	23	60	60			4
12. Totals.....	32	32	37	37	70	70	445	445	272	272			294

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....
2. 2015.....	11,681.....	11,681.....	.....	76.5.....	76.5.....	.....	.....	.....	.....	.....	.....
3. 2016.....	10,642.....	10,642.....	.....	60.4.....	60.4.....	.....	.....	.....	.....	.....	.....
4. 2017.....	15,962.....	15,962.....	.....	75.3.....	75.3.....	.....	.....	.....	.....	.....	.....
5. 2018.....	11,561.....	11,561.....	.....	60.2.....	60.2.....	.....	.....	.....	.....	.....	.....
6. 2019.....	10,950.....	10,950.....	.....	58.9.....	58.9.....	.....	.....	.....	.....	.....	.....
7. 2020.....	8,226.....	8,226.....	.....	48.7.....	48.7.....	.....	.....	.....	.....	.....	.....
8. 2021.....	9,241.....	9,241.....	.....	46.9.....	46.9.....	.....	.....	.....	.....	.....	.....
9. 2022.....	7,386.....	7,386.....	.....	43.8.....	43.8.....	.....	.....	.....	.....	.....	.....
10. 2023.....	4,578.....	4,578.....	.....	50.3.....	50.3.....	.....	.....	.....	.....	.....	.....
11. 2024.....	1,221.....	1,221.....	.....	109.4.....	109.4.....	.....	.....	.....	.....	.....	.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2015.....	5	5										XXX
3. 2016.....	1	1										XXX
4. 2017.....												XXX
5. 2018.....												XXX
6. 2019.....				7	7							XXX
7. 2020.....												XXX
8. 2021.....	1	1										XXX
9. 2022.....	3	3										XXX
10. 2023.....	4	4		2	2							XXX
11. 2024.....	4	4		3	3							XXX
12. Totals	XXX	XXX	XXX	12	12							XXX

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

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015.....											
3. 2016.....				0.1	0.1						
4. 2017.....				0.2	0.2						
5. 2018.....											
6. 2019.....	7	7									
7. 2020.....											
8. 2021.....				6.3	6.3						
9. 2022.....				11.7	11.7						
10. 2023.....	6	6		167.4	167.4						
11. 2024.....	13	13		344.1	344.1						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....
2. 2015.....												XXX.....
3. 2016.....	2.....	2.....										XXX.....
4. 2017.....	6.....	6.....		7.....	7.....							XXX.....
5. 2018.....	129.....	129.....		224.....	224.....							XXX.....
6. 2019.....	385.....	385.....		498.....	498.....							XXX.....
7. 2020.....	514.....	514.....		493.....	493.....							XXX.....
8. 2021.....	16.....	16.....		(221).....	(221).....			1.....	1.....			XXX.....
9. 2022.....	18.....	18.....										XXX.....
10. 2023.....	14.....	14.....										XXX.....
11. 2024.....												XXX.....
12. Totals	XXX	XXX	XXX	1,001	1,001			1	1			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....											
3. 2016.....				0.2.....	0.2.....						
4. 2017.....7	7.....	7.....		113.9.....	113.9.....						
5. 2018.....224	224.....	224.....		173.6.....	173.6.....						
6. 2019.....498	498.....	498.....		129.4.....	129.4.....						
7. 2020.....493	493.....	493.....		95.9.....	95.9.....						
8. 2021.....(220)	(220).....	(220).....		(1,374.1).....	(1,374.1).....						
9. 2022.....											
10. 2023.....				0.1.....	0.1.....						
11. 2024.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	11.....	11.....	42.....	42.....	5.....	5.....			XXX.....
2. 2015.....	347.....	347.....		32.....	32.....	37.....	37.....	3.....	3.....			3.....
3. 2016.....	1,122.....	1,122.....		1,619.....	1,619.....			10.....	10.....			9.....
4. 2017.....	704.....	704.....		215.....	215.....	146.....	146.....	16.....	16.....			10.....
5. 2018.....	189.....	189.....		66.....	66.....	73.....	73.....	10.....	10.....			6.....
6. 2019.....	192.....	192.....		203.....	203.....	42.....	42.....	16.....	16.....			10.....
7. 2020.....	228.....	228.....		50.....	50.....	82.....	82.....	20.....	20.....			8.....
8. 2021.....	529.....	529.....		223.....	223.....	23.....	23.....	8.....	8.....			8.....
9. 2022.....	1,249.....	1,249.....		260.....	260.....	148.....	148.....	24.....	24.....			23.....
10. 2023.....	1,106.....	1,106.....		27.....	27.....	156.....	156.....	20.....	20.....			21.....
11. 2024.....	1,419.....	1,419.....		87.....	87.....	146.....	146.....	22.....	22.....			17.....
12. Totals	XXX	XXX	XXX	2,793	2,793	896	896	155	155			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	230	230	64	64	648	648	44	44	39	39			37
2. 2015.....			17	17	10	10	51	51	5	5			
3. 2016.....			64	64			61	61	1	1			
4. 2017.....	25	25	141	141	36	36	100	100	29	29			1
5. 2018.....			143	143	29	29	85	85	3	3			
6. 2019.....			163	163	2	2	77	77	3	3			
7. 2020.....	80	80	281	281	82	82	93	93	17	17			1
8. 2021.....			355	355	14	14	171	171	21	21			
9. 2022.....	910	910	458	458	82	82	185	185	9	9			2
10. 2023.....	325	325	856	856	97	97	372	372	36	36			2
11. 2024.....	426	426	824	824	236	236	314	314	31	31			11
12. Totals	1,997	1,997	3,367	3,367	1,236	1,236	1,553	1,553	195	195			54

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....	155.....	155.....		44.8.....	44.8.....						
3. 2016.....	1,756.....	1,756.....		156.5.....	156.5.....						
4. 2017.....	708.....	708.....		100.5.....	100.5.....						
5. 2018.....	409.....	409.....		216.4.....	216.4.....						
6. 2019.....	507.....	507.....		263.9.....	263.9.....						
7. 2020.....	707.....	707.....		310.0.....	310.0.....						
8. 2021.....	815.....	815.....		154.1.....	154.1.....						
9. 2022.....	2,078.....	2,078.....		166.3.....	166.3.....						
10. 2023.....	1,889.....	1,889.....		170.8.....	170.8.....						
11. 2024.....	2,086.....	2,086.....		147.0.....	147.0.....						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....
2. 2015.....								1	1			
3. 2016.....												
4. 2017.....												
5. 2018.....												
6. 2019.....												
7. 2020.....	7	7										
8. 2021.....	351	351						1	1			
9. 2022.....	483	483		5	5			1	1			
10. 2023.....	409	409						1	1			
11. 2024.....	424	424						6	6			
12. Totals	XXX	XXX	XXX	5	5			11	11			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015.....	1	1									
3. 2016.....											
4. 2017.....											
5. 2018.....											
6. 2019.....											
7. 2020.....											
8. 2021.....	1	1		0.3	0.3						
9. 2022.....	6	6		1.3	1.3						
10. 2023.....	1	1		0.3	0.3						
11. 2024.....	6	6		1.5	1.5						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 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
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2015.....												XXX
3. 2016.....												XXX
4. 2017.....												XXX
5. 2018.....												XXX
6. 2019.....												XXX
7. 2020.....												XXX
8. 2021.....												XXX
9. 2022.....												XXX
10. 2023.....												XXX
11. 2024.....												XXX
12. Totals	XXX	XXX	XXX									XXX

NONE

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

NONE

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE 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
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2015.....												
3. 2016.....												
4. 2017.....												
5. 2018.....												
6. 2019.....												
7. 2020.....												
8. 2021.....												
9. 2022.....												
10. 2023.....												
11. 2024.....	1	1										
12. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015.....											
3. 2016.....											
4. 2017.....											
5. 2018.....											
6. 2019.....											
7. 2020.....											
8. 2021.....											
9. 2022.....											
10. 2023.....				23.7	23.7						
11. 2024.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE P - PART 1U - PET INSURANCE PLANS

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2015.....												XXX
3. 2016.....												XXX
4. 2017.....												XXX
5. 2018.....												XXX
6. 2019.....												XXX
7. 2020.....												XXX
8. 2021.....												XXX
9. 2022.....												XXX
10. 2023.....												XXX
11. 2024.....												XXX
12. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid		Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
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	27	28	29	30	31	32	33		35	36	
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX			
2. 2015.....												
3. 2016.....												
4. 2017.....												
5. 2018.....												
6. 2019.....												
7. 2020.....												
8. 2021.....												
9. 2022.....												
10. 2023.....												
11. 2024.....												
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX			

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS

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

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

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

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

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

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

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

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

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

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

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

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

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

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

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

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

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

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

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

SCHEDULE P - PART 2K - FIDELITY/SURETY

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

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

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

SCHEDULE P - PART 2M - INTERNATIONAL

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

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 2T - Warranty

N O N E

Schedule P - Part 2U - Pet Insurance Plans

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....											
2. 2015.....											21	10
3. 2016.....	XXX.....										13	9
4. 2017.....	XXX.....	XXX.....									9	5
5. 2018.....	XXX.....	XXX.....	XXX.....								15	3
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							17	4
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						16	14
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					42	15
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				32	21
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			13	15
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		7	5

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

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

NONE

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

1. Prior.....	000.....										220	63
2. 2015.....											525	393
3. 2016.....	XXX.....										577	468
4. 2017.....	XXX.....	XXX.....									650	497
5. 2018.....	XXX.....	XXX.....	XXX.....								548	387
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							580	406
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						367	278
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					457	369
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				326	294
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			162	153
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		22	20

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

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

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....										76	50
2. 2015.....											129	112
3. 2016.....	XXX.....										126	120
4. 2017.....	XXX.....	XXX.....									144	113
5. 2018.....	XXX.....	XXX.....	XXX.....								171	156
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							135	150
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						68	125
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					96	87
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				73	74
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			59	69
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		15	21

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

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

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

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

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

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

1. Prior.....	000.....										241.....	229.....
2. 2015.....											231.....	219.....
3. 2016.....	XXX.....										220.....	197.....
4. 2017.....	XXX.....	XXX.....									242.....	197.....
5. 2018.....	XXX.....	XXX.....	XXX.....								217.....	156.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							167.....	141.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						89.....	72.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					75.....	98.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				68.....	117.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			42.....	51.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		8.....	5.....

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

1. Prior.....	000.....										221.....	.....
2. 2015.....											218.....	105.....
3. 2016.....	XXX.....										193.....	95.....
4. 2017.....	XXX.....	XXX.....									192.....	83.....
5. 2018.....	XXX.....	XXX.....	XXX.....								249.....	81.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							273.....	71.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						262.....	91.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					241.....	97.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				205.....	81.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			144.....	48.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		43.....	18.....

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

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	000.....										5.....	2.....
2. 2015.....											454.....	204.....
3. 2016.....	XXX.....										388.....	197.....
4. 2017.....	XXX.....	XXX.....									460.....	241.....
5. 2018.....	XXX.....	XXX.....	XXX.....								381.....	199.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							319.....	221.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						251.....	155.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					309.....	187.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				232.....	134.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			135.....	65.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		18.....	12.....

SCHEDULE P - PART 3K - FIDELITY/SURETY

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

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

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

SCHEDULE P - PART 3M - INTERNATIONAL

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

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

SCHEDULE P - PART 3O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY

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

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

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

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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	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....										72.....	24.....
2. 2015.....											2.....	1.....
3. 2016.....	XXX.....										6.....	3.....
4. 2017.....	XXX.....	XXX.....									7.....	2.....
5. 2018.....	XXX.....	XXX.....	XXX.....								5.....	1.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							7.....	3.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						5.....	2.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					4.....	4.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				6.....	15.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			4.....	15.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		4.....	2.....

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

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

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

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

SCHEDULE P - PART 3T - WARRANTY

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

SCHEDULE P - PART 3U - PET INSURANCE PLANS

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

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SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS

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

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

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

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

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

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

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

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

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

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

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

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

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

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

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

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

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

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

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

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SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

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

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

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

SCHEDULE P - PART 4K - FIDELITY/SURETY

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

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

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

SCHEDULE P - PART 4M - INTERNATIONAL

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

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 4T - Warranty

N O N E

Schedule P - Part 4U - Pet Insurance Plans

N O N E

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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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	3									
2. 2015.....	18	20	21	21	21	21	21	21	21	21
3. 2016.....	XXX	13	13	13	13	13	13	13	13	13
4. 2017.....	XXX	XXX	6	8	9	9	9	9	9	9
5. 2018.....	XXX	XXX	XXX	12	15	15	15	15	15	15
6. 2019.....	XXX	XXX	XXX	XXX	12	16	17	17	17	17
7. 2020.....	XXX	XXX	XXX	XXX	XXX	9	15	16	16	16
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	28	42	42	42
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	32	32
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	13
11. 2024	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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	29	29	29	29		29	29	29	29	29
2. 2015.....	4	1								
3. 2016.....	XXX	2								
4. 2017.....	XXX	XXX	3	1	(1)					
5. 2018.....	XXX	XXX	XXX	5						
6. 2019.....	XXX	XXX	XXX	XXX	(1)	1				
7. 2020.....	XXX	XXX	XXX	XXX	XXX	9	1	1		
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	11			
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	1	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	1
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	5									
2. 2015.....	30	31	31	31	31	31	31	31	31	31
3. 2016.....	XXX	21	22	22	22	22	22	22	22	22
4. 2017.....	XXX	XXX	11	14	13	14	14	14	14	14
5. 2018.....	XXX	XXX	XXX	18	18	18	18	18	18	18
6. 2019.....	XXX	XXX	XXX	XXX	13	21	21	21	21	21
7. 2020.....	XXX	XXX	XXX	XXX	XXX	25	29	30	30	30
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	46	57	57	57
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50	54	53
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22	29
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13

ANNUAL STATEMENT FOR THE YEAR 2024 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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE 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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	335	125	59	22	7	3	2	1		1
2. 2015.....	272	442	478	503	520	524	525	525	525	525
3. 2016.....	XXX	255	472	529	562	574	575	576	576	577
4. 2017.....	XXX	XXX	323	519	586	614	635	646	650	650
5. 2018.....	XXX	XXX	XXX	277	455	507	524	539	548	548
6. 2019.....	XXX	XXX	XXX	XXX	302	480	535	556	573	580
7. 2020.....	XXX	XXX	XXX	XXX	XXX	183	308	340	359	367
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	217	377	432	457
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	172	294	326
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	110	162
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	1,752	1,658	1,617	1,601		1,597	1,595	1,595	1,595	1,595
2. 2015.....	309	73	36	11	(1)					
3. 2016.....	XXX	391	82	29	(1)		2		2	
4. 2017.....	XXX	XXX	373	92	(5)	26	10	2		
5. 2018.....	XXX	XXX	XXX	316	(5)	28	14	7		
6. 2019.....	XXX	XXX	XXX	XXX	18	86	30	15	4	2
7. 2020.....	XXX	XXX	XXX	XXX	XXX	238	58	28	7	4
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	295	71	26	9
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	218	58	24
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	107	32
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	154	76	25	11	4	6	1	1		1
2. 2015.....	790	876	898	907	912	917	918	918	918	918
3. 2016.....	XXX	885	987	1,017	1,025	1,039	1,043	1,044	1,046	1,045
4. 2017.....	XXX	XXX	981	1,067	1,061	1,132	1,141	1,145	1,147	1,147
5. 2018.....	XXX	XXX	XXX	798	807	916	924	933	935	935
6. 2019.....	XXX	XXX	XXX	XXX	538	927	952	969	983	988
7. 2020.....	XXX	XXX	XXX	XXX	XXX	571	620	640	642	649
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	733	800	825	835
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	573	632	644
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	311	347
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	53

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

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	134	134	134	134		134	4	3	2	2
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX	22	5	109				
6. 2019.....	XXX	XXX	XXX	XXX		9				
7. 2020.....	XXX	XXX	XXX	XXX	XXX	4				
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX	25	11	120	11	11	11	11
6. 2019.....	XXX	XXX	XXX	XXX	4	13	4	4	4	4
7. 2020.....	XXX	XXX	XXX	XXX	XXX	6	2	2	2	2
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE 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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	74	40	16	5	7	2	3	1	1	1
2. 2015.....	71	105	119	124	126	128	128	128	129	129
3. 2016.....	XXX	62	92	104	111	118	123	125	125	126
4. 2017.....	XXX	XXX	64	104	123	131	139	143	144	144
5. 2018.....	XXX	XXX	XXX	83	120	145	156	166	168	171
6. 2019.....	XXX	XXX	XXX	XXX	54	97	109	116	131	135
7. 2020.....	XXX	XXX	XXX	XXX	XXX	26	59	64	67	68
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	50	79	86	96
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	63	73
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38	59
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	426	388	369	366		367	363	364	364	365
2. 2015.....	78	26	11	5		1			1	
3. 2016.....	XXX	64	20	21	(1)	4	2			
4. 2017.....	XXX	XXX	83	29		12	5	1	1	
5. 2018.....	XXX	XXX	XXX	102	(1)	25	12	5	4	2
6. 2019.....	XXX	XXX	XXX	XXX		32	24	16	6	2
7. 2020.....	XXX	XXX	XXX	XXX	XXX	65	14	9	5	6
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	51	17	12	10
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	22	41
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	31
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	78	24	11	2	6	11	3	2	3	2
2. 2015.....	193	224	232	236	236	239	239	240	242	241
3. 2016.....	XXX	175	207	230	222	239	242	244	245	246
4. 2017.....	XXX	XXX	192	227	229	254	255	257	258	257
5. 2018.....	XXX	XXX	XXX	241	242	310	319	325	328	329
6. 2019.....	XXX	XXX	XXX	XXX	117	247	271	277	287	287
7. 2020.....	XXX	XXX	XXX	XXX	XXX	166	182	192	196	199
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	142	171	183	193
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	123	154	188
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	127	159
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	71

ANNUAL STATEMENT FOR THE YEAR 2024 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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE 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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	2									
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	4									
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE 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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	113	77	56	55	22	8	5	7	8	3
2. 2015.....	28	63	96	143	199	214	220	224	230	231
3. 2016.....	XXX	20	38	76	138	171	183	205	213	220
4. 2017.....	XXX	XXX	27	53	108	152	189	219	231	242
5. 2018.....	XXX	XXX	XXX	19	50	84	118	166	199	217
6. 2019.....	XXX	XXX	XXX	XXX	17	46	67	104	151	167
7. 2020.....	XXX	XXX	XXX	XXX	XXX	16	34	52	74	89
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	11	35	56	75
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21	49	68
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24	42
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	1,939	1,914	1,852	1,814	(1)	1,790	1,783	1,782	1,784	1,781
2. 2015.....	71	90	110	72	3	24	6	7	3	1
3. 2016.....	XXX	75	97	90	(4)	58	16	18	7	5
4. 2017.....	XXX	XXX	70	85	(1)	97	36	19	11	3
5. 2018.....	XXX	XXX	XXX	55	3	118	68	35	17	9
6. 2019.....	XXX	XXX	XXX	XXX	3	75	64	58	19	11
7. 2020.....	XXX	XXX	XXX	XXX	XXX	35	33	40	27	11
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	74	43	28	9
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	98	39	36
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51	25
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	119	103	62	58	5	30	6	12	15	2
2. 2015.....	120	217	307	350	375	422	427	440	446	451
3. 2016.....	XXX	114	194	272	273	386	373	411	414	422
4. 2017.....	XXX	XXX	124	196	189	374	378	426	434	442
5. 2018.....	XXX	XXX	XXX	98	96	267	282	340	371	382
6. 2019.....	XXX	XXX	XXX	XXX	46	182	213	277	302	319
7. 2020.....	XXX	XXX	XXX	XXX	XXX	70	100	140	164	172
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	102	149	174	182
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	153	196	221
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	103	118
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30

ANNUAL STATEMENT FOR THE YEAR 2024 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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	205	126	52	26	9	4	3		1	
2. 2015.....	42	142	195	205	215	217	217	218	218	218
3. 2016.....	XXX	40	128	167	188	190	192	193	193	193
4. 2017.....	XXX	XXX	46	130	169	178	184	190	191	192
5. 2018.....	XXX	XXX	XXX	53	173	217	233	244	247	249
6. 2019.....	XXX	XXX	XXX	XXX	62	194	246	265	272	273
7. 2020.....	XXX	XXX	XXX	XXX	XXX	103	191	238	256	262
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	67	156	211	241
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	152	205
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29	144
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	728	644	616	606		598	597	597	598	597
2. 2015.....	96	56	12	6	1	1	1			
3. 2016.....	XXX	86	57	22	1		1		1	
4. 2017.....	XXX	XXX	94	52	(1)	1	4	1		
5. 2018.....	XXX	XXX	XXX	101	(8)	28	8	3	1	
6. 2019.....	XXX	XXX	XXX	XXX	(3)	66	22	7	2	2
7. 2020.....	XXX	XXX	XXX	XXX	XXX	128	54	16	6	2
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	94	67	21	5
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	110	59	34
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	105	97
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	137

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	285	108	38	27	5	6	2	1	2	(1)
2. 2015.....	160	269	297	311	320	322	323	323	323	323
3. 2016.....	XXX	142	244	268	279	283	286	288	289	288
4. 2017.....	XXX	XXX	149	234	238	254	266	272	274	275
5. 2018.....	XXX	XXX	XXX	173	220	315	321	327	329	330
6. 2019.....	XXX	XXX	XXX	XXX	74	298	326	338	344	346
7. 2020.....	XXX	XXX	XXX	XXX	XXX	248	307	334	350	355
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	174	281	314	343
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	170	276	320
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	146	289
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	198

ANNUAL STATEMENT FOR THE YEAR 2024 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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	32	28	21	12	7	1		1	1	1
2. 2015.....		1	1	1	1	1	1	1	1	2
3. 2016.....	XXX	2	3	5	6	6	6	6	6	6
4. 2017.....	XXX	XXX	1	5	5	5	6	6	7	7
5. 2018.....	XXX	XXX	XXX	2	2	3	4	5	5	5
6. 2019.....	XXX	XXX	XXX	XXX	1	4	7	7	7	7
7. 2020.....	XXX	XXX	XXX	XXX	XXX	2	4	4	4	5
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX		2	3	4
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX		5	6
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	4
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	72	57	48	39	(2)	37	37	36	35	37
2. 2015.....	1									
3. 2016.....	XXX	4	2							
4. 2017.....	XXX	XXX	4			2			1	1
5. 2018.....	XXX	XXX	XXX	1		1	1	2		
6. 2019.....	XXX	XXX	XXX	XXX		3				
7. 2020.....	XXX	XXX	XXX	XXX	XXX	2		1	3	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	3	3	2	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	4	2
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	2
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	39	6	8	3	3	2		1		3
2. 2015.....	1	2	2	2	2	2	2	2	2	3
3. 2016.....	XXX	6	6	7	9	9	9	9	9	9
4. 2017.....	XXX	XXX	6	7	7	9	8	8	10	10
5. 2018.....	XXX	XXX	XXX	3	2	4	5	7	6	6
6. 2019.....	XXX	XXX	XXX	XXX	2	9	9	9	9	10
7. 2020.....	XXX	XXX	XXX	XXX	XXX	5	5	7	9	8
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	4	6	7	8
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	21	23
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	21
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17

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

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	1									
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	2									
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE 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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	.XXX									
4. 2017.....	.XXX	.XXX								
5. 2018.....	.XXX	.XXX	.XX							
6. 2019.....	.XXX	.XXX	.XX	.XXX						
7. 2020.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2023.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2024	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	.XXX									
4. 2017.....	.XXX	.XXX								
5. 2018.....	.XXX	.XXX	.XX							
6. 2019.....	.XXX	.XXX	.XX	.XXX						
7. 2020.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2023.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2024	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	.XXX									
4. 2017.....	.XXX	.XXX								
5. 2018.....	.XXX	.XXX	.XX							
6. 2019.....	.XXX	.XXX	.XX	.XXX						
7. 2020.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2023.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2024	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE 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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527	
3. 2016.....	XXX	37,062	37,062	37,062	37,062	37,062	37,062	37,062	37,062	37,062	
4. 2017.....	XXX	XXX	40,889	40,889	40,889	40,889	40,889	40,889	40,889	40,889	
5. 2018.....	XXX	XXX	XXX	38,830	38,830	38,830	38,830	38,830	38,830	38,830	
6. 2019.....	XXX	XXX	XXX	XXX	44,395	44,395	44,395	44,395	44,395	44,395	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	44,124	44,124	44,124	44,124	44,124	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	52,725	52,725	52,725	52,725	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45,935	45,935	45,935	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,211	27,211	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,737	5,737
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,737
13. Earned Premiums (Sch P-Pt. 1)	34,527	37,062	40,889	38,830	44,395	44,124	52,725	45,935	27,211	5,737	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527	34,527	
3. 2016.....	XXX	37,062	37,062	37,062	37,062	37,062	37,062	37,062	37,062	37,062	
4. 2017.....	XXX	XXX	40,889	40,889	40,889	40,889	40,889	40,889	40,889	40,889	
5. 2018.....	XXX	XXX	XXX	38,830	38,830	38,830	38,830	38,830	38,830	38,830	
6. 2019.....	XXX	XXX	XXX	XXX	44,395	44,395	44,395	44,395	44,395	44,395	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	44,124	44,124	44,124	44,124	44,124	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	52,725	52,725	52,725	52,725	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45,935	45,935	45,935	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,211	27,211	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,737	5,737
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,737
13. Earned Premiums (Sch P-Pt. 1)	34,527	37,062	40,889	38,830	44,395	44,124	52,725	45,935	27,211	5,737	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX	XXX	89	89	89	89	89	89	89	
6. 2019.....	XXX	XXX	XXX	XXX	132	132	132	132	132	132	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	9	9	9	9	9	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	(1)	(1)	(1)	(1)	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)				89	132	9	(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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX	XXX	89	89	89	89	89	89	89	
6. 2019.....	XXX	XXX	XXX	XXX	132	132	132	132	132	132	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	9	9	9	9	9	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	(1)	(1)	(1)	(1)	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)				89	132	9	(1)				XXX

ANNUAL STATEMENT FOR THE YEAR 2024 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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808	
3. 2016.....	XXX	16,069	16,069	16,069	16,069	16,069	16,069	16,069	16,069	16,069	
4. 2017.....	XXX	XXX	16,405	16,405	16,405	16,405	16,405	16,405	16,405	16,405	
5. 2018.....	XXX	XXX	XXX	17,047	17,047	17,047	17,047	17,047	17,047	17,047	
6. 2019.....	XXX	XXX	XXX	XXX	18,676	18,676	18,676	18,676	18,676	18,676	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	17,698	17,698	17,698	17,698	17,698	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	15,517	15,517	15,517	15,517	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,938	16,938	16,938	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,557	16,557	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,227	10,227
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,227
13. Earned Premiums (Sch P-Pt. 1)	14,808	16,069	16,405	17,047	18,676	17,698	15,517	16,938	16,557	10,227	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808	14,808	
3. 2016.....	XXX	16,069	16,069	16,069	16,069	16,069	16,069	16,069	16,069	16,069	
4. 2017.....	XXX	XXX	16,405	16,405	16,405	16,405	16,405	16,405	16,405	16,405	
5. 2018.....	XXX	XXX	XXX	17,047	17,047	17,047	17,047	17,047	17,047	17,047	
6. 2019.....	XXX	XXX	XXX	XXX	18,676	18,676	18,676	18,676	18,676	18,676	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	17,698	17,698	17,698	17,698	17,698	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	15,517	15,517	15,517	15,517	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,938	16,938	16,938	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,557	16,557	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,227	10,227
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,227
13. Earned Premiums (Sch P-Pt. 1)	14,808	16,069	16,405	17,047	18,676	17,698	15,517	16,938	16,557	10,227	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469	
3. 2016.....	XXX	69,060	69,060	69,060	69,060	69,060	69,060	69,060	69,060	69,060	
4. 2017.....	XXX	XXX	60,603	60,603	60,603	60,603	60,603	60,603	60,603	60,603	
5. 2018.....	XXX	XXX	XXX	50,719	50,719	50,719	50,719	50,719	50,719	50,719	
6. 2019.....	XXX	XXX	XXX	XXX	46,796	46,796	46,796	46,796	46,796	46,796	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	40,404	40,404	40,404	40,404	40,404	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	29,495	29,495	29,495	29,495	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,642	23,642	23,642	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,991	22,991	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,661	24,661
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,661
13. Earned Premiums (Sch P-Pt. 1)	54,469	69,060	60,603	50,719	46,796	40,404	29,495	23,642	22,991	24,661	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469	54,469	
3. 2016.....	XXX	69,060	69,060	69,060	69,060	69,060	69,060	69,060	69,060	69,060	
4. 2017.....	XXX	XXX	60,603	60,603	60,603	60,603	60,603	60,603	60,603	60,603	
5. 2018.....	XXX	XXX	XXX	50,719	50,719	50,719	50,719	50,719	50,719	50,719	
6. 2019.....	XXX	XXX	XXX	XXX	46,796	46,796	46,796	46,796	46,796	46,796	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	40,404	40,404	40,404	40,404	40,404	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	29,495	29,495	29,495	29,495	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,642	23,642	23,642	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,991	22,991	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,661	24,661
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,661
13. Earned Premiums (Sch P-Pt. 1)	54,469	69,060	60,603	50,719	46,796	40,404	29,495	23,642	22,991	24,661	XXX

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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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988	
3. 2016.....	XXX	115,523	115,523	115,523	115,523	115,523	115,523	115,523	115,523	115,523	
4. 2017.....	XXX	XXX	116,744	116,744	116,744	116,744	116,744	116,744	116,744	116,744	
5. 2018.....	XXX	XXX	XXX	118,601	118,601	118,601	118,601	118,601	118,601	118,601	
6. 2019.....	XXX	XXX	XXX	XXX	116,367	116,367	116,367	116,367	116,367	116,367	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	129,165	129,165	129,165	129,165	129,165	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	169,374	169,374	169,374	169,374	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	200,514	200,514	200,514	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	195,299	195,299	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	173,805	173,805
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	173,805
13. Earned Premiums (Sch P-Pt. 1)	108,988	115,523	116,744	118,601	116,367	129,165	169,374	200,514	195,299	173,805	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988	108,988	
3. 2016.....	XXX	115,523	115,523	115,523	115,523	115,523	115,523	115,523	115,523	115,523	
4. 2017.....	XXX	XXX	116,744	116,744	116,744	116,744	116,744	116,744	116,744	116,744	
5. 2018.....	XXX	XXX	XXX	118,601	118,601	118,601	118,601	118,601	118,601	118,601	
6. 2019.....	XXX	XXX	XXX	XXX	116,367	116,367	116,367	116,367	116,367	116,367	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	129,165	129,165	129,165	129,165	129,165	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	169,374	169,374	169,374	169,374	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	200,514	200,514	200,514	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	195,299	195,299	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	173,805	173,805
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	173,805
13. Earned Premiums (Sch P-Pt. 1)	108,988	115,523	116,744	118,601	116,367	129,165	169,374	200,514	195,299	173,805	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX						XXX			
11. 2024.....	XXX	XXX						XXX	XXX		
12. Totals.....	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX						XXX			
11. 2024.....	XXX	XXX						XXX	XXX		
12. Totals.....	XXX	XXX						XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2024 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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX									
11. 2024.....	XXX	XXX									
12. Totals.....	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX									
11. 2024.....	XXX	XXX									
12. Totals.....	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX									
11. 2024.....	XXX	XXX									
12. Totals.....	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX									
11. 2024.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2024 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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....	347	347	347	347	347	347	347	347	347	347	
3. 2016.....	XXX	1,122	1,122	1,122	1,122	1,122	1,122	1,122	1,122	1,122	
4. 2017.....	XXX	XXX	704	704	704	704	704	704	704	704	
5. 2018.....	XXX	XXX	XXX	189	189	189	189	189	189	189	
6. 2019.....	XXX	XXX	XXX	XXX	192	192	192	192	192	192	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	228	228	228	228	228	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	529	529	529	529	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,249	1,249	1,249	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,106	1,106	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,419	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,419
13. Earned Premiums (Sch P-Pt. 1)	347	1,122	704	189	192	228	529	1,249	1,106	1,419	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....	347	347	347	347	347	347	347	347	347	347	
3. 2016.....	XXX	1,122	1,122	1,122	1,122	1,122	1,122	1,122	1,122	1,122	
4. 2017.....	XXX	XXX	704	704	704	704	704	704	704	704	
5. 2018.....	XXX	XXX	XXX	189	189	189	189	189	189	189	
6. 2019.....	XXX	XXX	XXX	XXX	192	192	192	192	192	192	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	228	228	228	228	228	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	529	529	529	529	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,249	1,249	1,249	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,106	1,106	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,419	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,419
13. Earned Premiums (Sch P-Pt. 1)	347	1,122	704	189	192	228	529	1,249	1,106	1,419	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX	XXX								
6. 2019.....	XXX	XXX	XXX	XXX							
7. 2020.....	XXX	XXX	XXX	XXX	XXX	7	7	7	7	7	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	351	351	351	351	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	483	483	483	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	409	409	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	424	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	424
13. Earned Premiums (Sch P-Pt. 1)						7	351	483	409	424	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX	XXX								
6. 2019.....	XXX	XXX	XXX	XXX							
7. 2020.....	XXX	XXX	XXX	XXX	XXX	7	7	7	7	7	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	351	351	351	351	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	483	483	483	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	409	409	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	424	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	424
13. Earned Premiums (Sch P-Pt. 1)						7	351	483	409	424	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

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 [☒]
If the answer to question 1.1 is “no”, leave the following questions blank. If the answer to question 1.1 is “yes”, please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?\$
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No []
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No []
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A []
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

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

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as “Defense and Cost Containment” and “Adjusting and Other”) reported in compliance with these definitions in this statement? Yes [☒] 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 [☒] 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 [☒]

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 [☒]
- 7.2 (An extended statement may be attached.)
.....

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

Allocated by States and Territories

			Direct Business Only					
			1	2	3	4	5	6
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	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 2024 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	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	10 W. Nationwide, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	100 Green Meadows Drive, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	1000 Yard Street, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	1050 Yard Street, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	1055 Yard Street, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	1125 Rail Street, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1733036 .....	.....	.....	.....	120 Acre Partners, LLC .....	.. DE.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	95.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	1125 Yard Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939867 .....	.....	.....	.....	1175 Bobcat, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	26-2451988 .....	.....	.....	.....	1492 Capital, LLC .....	.. OH.....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	111 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	155 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	161 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	170 Marconi, LLC .....	.. OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	38-4118665 .....	.....	.....	.....	220 Vine St., LLC .....	.. OH.....	NIA.....	NWD HP, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	245 Parks Edge Place, LLC .....	.. OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	275 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	280 High Street, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	300 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	310 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	343 N. Front, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	400 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	400 West Nationwide Boulevard, LLC .....	.. OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	410 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	425 West Nationwide Boulevard, LLC .....	.. OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	44 Chestnut, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	38-4118665 .....	.....	.....	.....	500 Neil Avenue, LLC .....	.. OH.....	NIA.....	NWD HP, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	38-4118665 .....	.....	.....	.....	515 Kilbourne Street, LLC .....	.. OH.....	NIA.....	NWD HP, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	87-1954007 .....	.....	.....	.....	525 Cleveland Avenue, LLC .....	.. OH.....	NIA.....	Nationwide Financial Services, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	75 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	775 Yard Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	777 Swan Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	780 Yard Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	795 Rail Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	800 Bobcat Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	800 Goodale Boulevard, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	800 Yard Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	805 Bobcat Avenue, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	808 Yard Street, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	820 Goodale Boulevard, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	822 Williams Avenue, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	825 Junction Way, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	828 Bobcat Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	840 Third Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	840 Yard Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	845 Yard Street, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	855 Third Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	860 Third Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	875 First Avenue, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 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	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0140	Nationwide		20-4939866				875 Junction Way, LLC	..OH.....	..NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		20-4939866				880 Third Avenue, LLC	..OH.....	..NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		20-4939866				880 Yard Street, LLC	..OH.....	..NIA.....	GVY Residential, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		20-4939866				895 W. Third Avenue, LLC	..OH.....	..NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		20-4939866				950 Dorchester Way, LLC	..OH.....	..NIA.....	GVY Residential, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		20-4939866				950 Goodale Boulevard, LLC	..OH.....	..NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1486309				960 Bobcat Avenue, LLC	..OH.....	..NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1486309				975 Rail Street, LLC	..OH.....	..NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1486309				995 Yard Street, LLC	..OH.....	..NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1486309				12062 Sycamore Trace, LLC	..OH.....	..NIA.....	Jerome Village Company, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1486309				18615 Claret Drive, LLC	..OH.....	..NIA.....	NRI Cavasson, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1486309				18655 Claret Drive, LLC	..OH.....	..NIA.....	NRI Cavasson, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1486309				18700 Hayden Road, LLC	..OH.....	..NIA.....	NRI Cavasson, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1486309				18750 Hayden Road, LLC	..OH.....	..NIA.....	NRI Cavasson, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1580283				AD DORA, LLC	..OH.....	..NIA.....	NID Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1580283				ADTV, LLC	..OH.....	..NIA.....	NID Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide	10127	27-0114983				ALLIED Insurance Company of America	..OH.....	..IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
							ALLIED Property and Casualty Insurance Company	..IA.....	..IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide	42579	42-1201931				ALLIED Texas Agency, Inc.	..TX.....	..IA.....	AMCO Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide	19100	42-6054959				AMCO Insurance Company	..IA.....	..IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		59-1031596				American Marine Underwriters, Inc.	..FL.....	..NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		81-4532504				American Tax Credit Fund 2017-A, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		82-2001573				American Tax Credit Fund 2017-B, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		82-4591498				American Tax Credit Fund 2018-A, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		83-0606592				American Tax Credit Fund 2018-B, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		83-0620232				American Tax Credit Fund 2018-C, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		83-3900932				American Tax Credit Fund 2019-A, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		83-3953721				American Tax Credit Fund 2019-B, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		84-3443067				American Tax Credit Fund 2020-A, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		85-2359702				American Tax Credit Fund 2020-B, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
							American Tax Credit Fund 2021-A, LLC (fka	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		85-2649655				American Tax Credit Fund 2020-C, LLC)	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		86-2502912				American Tax Credit Fund 2021-B, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		87-1349942				American Tax Credit Fund 2021-C, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
							American Tax Credit Fund 2023-B, LLC (fka	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		87-4753681				American Tax Credit Fund 2022-A, LLC)	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
							American Tax Credit Fund 2023-C, LLC (fka	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		87-4771309				American Tax Credit Fund 2022-B, LLC)	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		92-1389304				American Tax Credit Fund 2023-A, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		99-0672884				American Tax Credit Fund 2024-A, LLC	..OH.....	..OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	....NO.....	1
.0140	Nationwide		99-0698188				American Tax Credit Fund 2024-B, LLC	..OH.....	..NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1580283				Arena District CA 1, LLC	..OH.....	..NIA.....	NID Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
			90-0280710				Arena District Owners Association	..OH.....	..OTH.....	Other non-Nationwide	Other.....	0.000	Other non-Nationwide	....NO.....	2
.0140	Nationwide		31-1486309				Cavasson Hotel, LLC	..OH.....	..NIA.....	Cavasson Hotel Holdings, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		31-1486309				Cavasson Hotel Holdings, LLC	..OH.....	..NIA.....	NRI Cavasson, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		20-1618232				CNRI-Cannonsport Condominium, LLC	..OH.....	..NIA.....	CNRI-Cannonsport, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide		20-1618232				CNRI-Cannonsport, LLC	..OH.....	..NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	
.0140	Nationwide	29262	74-1061659				Colonial County Mutual Insurance Company	..TX.....	..IA.....	Other non-Nationwide	Other.....	0.000	Other non-Nationwide	....NO.....	2
.0140	Nationwide	18961	68-0066866				Crestbrook Insurance Company	..OH.....	..IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	....NO.....	

ANNUAL STATEMENT FOR THE YEAR 2024 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 Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	Crewville, Ltd. ....	.. OH.....	.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	84-5052608 ..	.....	.....	.....	Danforth, LLC ....	.. OH.....	.....NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....42587 ..	42-1207150 ..	.....	.....	.....	Depositors Insurance Company .....	.. IA.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
.....	.....	.....	46-4104813 ..	.....	.....	.....	Discover Affordable Housing Investment Fund I LLC .....	.. OH.....	.....OTH.....	Other non-Nationwide	Other.....	0.000 ...	Other non-Nationwide .....	... NO.....	.....2
. 0140 ...	Nationwide ...	.....	33-0096671 ..	.....	.....	.....	DVM Insurance Agency .....	.. CA.....	.....NIA.....	Veterinary Pet Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....15821 ..	47-4523959 ..	.....	.....	.....	Eagle Captive Reinsurance, LLC .....	.. OH.....	.....IA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	26-3260559 ..	.....	.....	.....	E-Risk Services, L.L.C. ....	.. DE.....	.....NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....22209 ..	75-6013587 ..	.....	.....	.....	Freedom Specialty Insurance Company .....	.. OH.....	.....IA.....	Scottsdale Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 ..	.....	.....	.....	Grandview Yard Hotel Holdings, LLC .....	.. OH.....	.....NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 ..	.....	.....	.....	Grandview Yard Hotel, LLC .....	.. OH.....	.....NIA.....	Grandview Yard Hotel Holdings, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 ..	.....	.....	.....	GVY Residential, LLC .....	.. OH.....	.....NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....23582 ..	41-0417250 ..	.....	.....	.....	Harleysville Insurance Company .....	.. OH.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Harleysville Insurance Company of New Jersey .....	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide ...	.....42900 ..	23-2253669 ..	.....	.....	.....	.....	.. NJ.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....10674 ..	23-2864924 ..	.....	.....	.....	Harleysville Insurance Company of New York ..	.. OH.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....35696 ..	23-2384978 ..	.....	.....	.....	Harleysville Preferred Insurance Company ....	.. OH.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....26182 ..	04-1989660 ..	.....	.....	.....	Harleysville Worcester Insurance Company .....	.. OH.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....64017 ..	75-0300900 ..	.....	.....	.....	Jefferson National Life Insurance Company ...	.. TX.....	.....IA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Jefferson National Life Insurance Company of New York .....	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide ...	.....15727 ..	47-1180302 ..	.....	.....	.....	.....	.. NY.....	.....IA.....	Jefferson National Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	Jerome Village Company, LLC .....	.. OH.....	.....NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	74-1395229 ..	.....	.....	.....	Lone Star General Agency, Inc. ....	.. TX.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....11991 ..	38-0865250 ..	.....	.....	.....	National Casualty Company .....	.. OH.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	.....	.....	.....	.....	National Casualty Company of America, Ltd. .	.. GBR.....	.....IA.....	National Casualty Company	Ownership.....	100.000 ...	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.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	ALLIED Property & Casualty Insurance Company .....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide ...	.....	42-1154244 ..	.....	.....	.....	Nationwide Advantage Mortgage Company .....	.. IA.....	.....NIA.....	Company	Ownership.....	8.470 ...	Nationwide Mutual Insurance Company ...	... YES.....	.....
. 0140 ...	Nationwide ...	.....	42-1154244 ..	.....	.....	.....	Nationwide Advantage Mortgage Company .....	.. IA.....	.....NIA.....	Depositors Insurance Company	Ownership.....	4.230 ...	Nationwide Mutual Insurance Company ...	... YES.....	.....
. 0140 ...	Nationwide ...	.....26093 ..	48-0470690 ..	.....	.....	.....	Nationwide Affinity Insurance Company of America .....	.. OH.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	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.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....28223 ..	42-1015537 ..	.....	.....	.....	Nationwide Agribusiness Insurance Company ...	.. IA.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1578869 ..	.....	.....	.....	Nationwide Arena, LLC .....	.. OH.....	.....NIA.....	NRI Arena, LLC	Ownership.....	90.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-8670712 ..	.....	.....	.....	Nationwide Asset Management, LLC .....	.. OH.....	.....NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....10723 ..	95-0639970 ..	.....	.....	.....	Nationwide Assurance Company .....	.. OH.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1036287 ..	.....	.....	.....	Nationwide Cash Management Company .....	.. OH.....	.....NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-4416546 ..	.....	.....	.....	Nationwide Corporation .....	.. OH.....	.....NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... YES.....	.....
. 0140 ...	Nationwide ...	.....	31-1667326 ..	.....	.....	.....	Nationwide Financial Assignment Company ....	.. OH.....	.....NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	23-2412039 ..	.....	.....	.....	Nationwide Financial General Agency, Inc. ...	.. PA.....	.....NIA.....	NFS Distributors, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-6554353 ..	.....	.....	.....	Nationwide Financial Services Capital Trust ..	.. DE.....	.....NIA.....	Nationwide Financial Services, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486870 ..	.....	.....	.....	Nationwide Financial Services, Inc. ....	.. DE.....	.....NIA.....	Nationwide Corporation	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	52-6969857 ..	.....	.....	.....	Nationwide Fund Advisors .....	.. DE.....	.....NIA.....	Nationwide Financial Services, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1748721 ..	.....	.....	.....	Nationwide Fund Distributors LLC .....	.. DE.....	.....NIA.....	NFS Distributors, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-0900518 ..	.....	.....	.....	Nationwide Fund Management LLC .....	.. DE.....	.....NIA.....	NFS Distributors, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....23760 ..	31-4425763 ..	.....	.....	.....	Nationwide General Insurance Company .....	.. OH.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....10070 ..	31-1399201 ..	.....	.....	.....	Nationwide Indemnity Company .....	.. OH.....	.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide25453 ..	95-2130882	Nationwide Insurance Company of America OH.....IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company NO.....

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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 Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0140 ...	Nationwide	10948	31-1613686 ..	.....	.....	.....	Nationwide Insurance Company of Florida .....	.. OH.....	..... IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	41-2206199 ..	.....	.....	.....	Nationwide Investment Advisors, LLC .....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	73-0988442 ..	.....	.....	.....	Nationwide Investment Services Corporation ..	.. OK.....	..... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... YES.....	.....
.....	.....	.....	.....	.....	.....	.....	Nationwide Life and Annuity Insurance Company	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide	92657	31-1000740 ..	.....	.....	.....	Nationwide Life 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.....	.....
.....	.....	.....	.....	.....	.....	.....	Nationwide Life Tax Credit Partners 2003-A, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide .....	.....	54-2113175 ..	.....	.....	.....	Nationwide Life Tax Credit Partners 2003-B, LLC .....	.. OH.....	..... OTH.....	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.....	..... OTH.....	Nationwide Life Insurance Company	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	.... NO.....	..... 1
.....	.....	.....	.....	.....	.....	.....	Nationwide Life Tax Credit Partners 2004-A, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide .....	.....	20-0382144 ..	.....	.....	.....	Nationwide Life Tax Credit Partners 2004-F, LLC .....	.. OH.....	..... OTH.....	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.....	..... OTH.....	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.....	..... OTH.....	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.....	..... OTH.....	Nationwide Life Insurance Company	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	.... NO.....	..... 1
. 0140 ...	Nationwide .....	.....	20-2303602 ..	.....	.....	.....	Nationwide Life Tax Credit Partners 2009-I, LLC .....	.. OH.....	..... OTH.....	Nationwide Life Insurance Company	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	.... NO.....	..... 1
.....	.....	.....	.....	.....	.....	.....	Nationwide Sales Solutions, Inc. (fka	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide .....	.....	42-1373380 ..	.....	.....	.....	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	Ownership.....	0.000 ...	Other non-Nationwide .....	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	34-2012765 ..	.....	.....	.....	Nationwide Private Equity Fund, LLC .....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Nationwide Property and Casualty Insurance Company .....	.....	.....	.....	.....	.....	.....	.....	.....
. 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.....	97.120 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	Nationwide Realty Investors, Ltd. ....	.. OH.....	..... NIA.....	Nationwide Indemnity Company	Ownership.....	2.880 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	Nationwide Realty Management, LLC .....	.. OH.....	..... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	.....	.....	.....	.....	Nationwide Realty Services, Ltd. ....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	73-0948330 ..	.....	.....	.....	Nationwide Retirement Solutions, Inc. ....	.. DE.....	..... NIA.....	NFS Distributors, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Nationwide Life and Annuity Insurance Company .....	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide .....	.....	83-2250056 ..	.....	.....	.....	Nationwide SBL, LLC .....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	36-2434406 ..	.....	.....	.....	Nationwide Securities, LLC .....	.. OH.....	..... NIA.....	NFS Distributors, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	46-1952215 ..	.....	.....	.....	Nationwide Tax Credit Partners 2013-A, LLC ..	.. OH.....	..... OTH.....	Nationwide Life Insurance Company	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	.... NO.....	..... 1
. 0140 ...	Nationwide .....	.....	46-1971926 ..	.....	.....	.....	Nationwide Tax Credit Partners 2013-B, LLC ..	.. OH.....	..... OTH.....	Nationwide Life Insurance Company	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	.... NO.....	..... 1
. 0140 ...	Nationwide .....	.....	31-1592130 ..	2729677 .....	.....	.....	Nationwide Trust Company, FSB .....	.. US.....	..... NIA.....	Nationwide Financial Services, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-5976272 ..	.....	.....	.....	Nationwide Ventures, LLC .....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-0871532 ..	.....	.....	.....	NBS Insurance Agency, Inc. ....	.. OH.....	..... IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	85-4193218 ..	.....	.....	.....	NCS Arizona, LLC .....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	11-3651828 ..	.....	.....	.....	ND La Quinta Partners, LLC .....	.. DE.....	..... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	95.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1630871 ..	.....	.....	.....	NFS Distributors, Inc. ....	.. DE.....	..... NIA.....	Nationwide Financial Services, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Nationwide Life and Annuity Insurance Company .....	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide .....	.....	93-4557312 ..	.....	.....	.....	NLAIC REO Holdings, LLC .....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	82-5195340 ..	.....	.....	.....	NLIC REO Holdings, LLC .....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	82-5194959 ..	.....	.....	.....	NMIC REO Holdings, LLC .....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	46-3762545 ..	.....	.....	.....	NNOV8, LLC .....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	North of Third, LLC .....	.. OH.....	..... NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	NRI Arena, LLC .....	.. OH.....	..... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	NRI Brookside, LLC .....	.. OH.....	..... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 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	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0140	Nationwide		31-1486309				NRI Builders, LLC	..OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1486309				NRI Cavasson, LLC	..OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1486309				NRI Corporate Housing, LLC	..OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1486309				NRI Cramer Creek, LLC	..OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		20-4939866				NRI Equity Land Investments, LLC	..OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	80.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		26-0212217				NRI Equity Tampa, LLC	..OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1486309				NRI Office Ventures, Ltd	..OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NRI Telecom, LLC	..OH.....	NIA.....	NID Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1486309				NRI-Rivulon, LLC	..OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		90-0729552				NTCIF-2011, LLC	..OH.....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		27-4700627				NTCP 2011-A, LLC	..OH.....	OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		46-0741029				NTCP 2012-A, LLC	..OH.....	OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		46-3309896				NTCP 2013-C, LLC	..OH.....	OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		46-4111078				NTCP 2014-A, LLC	..OH.....	OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		47-1404116				NTCP 2014-B, LLC	..OH.....	OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		47-1413242				NTCP 2014-C, LLC	..OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		47-3908345				NTCP 2015-A, LLC	..OH.....	OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		47-4148470				NTCP 2015-B, LLC	..OH.....	OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		81-3836925				NTCP 2016-A, LLC	..OH.....	OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		82-2015065				NTCP 2017-A, LLC	..OH.....	OTH.....	Nationwide Life Insurance Company	Other.....	0.010	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		84-1969518				NW Fyrebyrd, LLC	..OH.....	NIA.....	NNOV8, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		85-3363961				NW Next, LLC	..OH.....	NIA.....	NNOV8, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		81-0936428				NW Private Debt, LLC	..OH.....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		26-1903919				NW REI, LLC	..DE.....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		92-1294202				NW-Adams, LLC	..OH.....	NIA.....	NW REI, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		92-1294202				NW-Aureum, LLC	..OH.....	NIA.....	NW REI (NLI)C, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		92-2674633				NW-Brandon LLC	..OH.....	NIA.....	NW REI (NLI)C, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		87-0847675				NW-Broadway at Surf, LLC	..OH.....	NIA.....	NMIC REO Holdings, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		88-2152576				NW-Colfax, LLC	..OH.....	NIA.....	NW REI (NLA)C, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		92-0292630				NW-Conroe, LLC	..OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		87-3648595				NW-Corazon, LLC	..OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		99-3065627				NW-Denton, LLC	..OH.....	NIA.....	NW REI, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		86-3529884				NW-Englewood, LLC	..OH.....	NIA.....	NW REI (NLI)C, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		84-4388876				NW-Escalante, LLC	..OH.....	NIA.....	NW REI, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		86-1538532				NW-Escalante II, LLC	..OH.....	NIA.....	NW REI, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		92-3310596				NW-FSU, LLC	..OH.....	NIA.....	NW REI (NLI)C, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 205 Vine, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 225 Nationwide, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 230 West, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 240 Nationwide, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 250 Brodbelt, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 250 West, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 265 Neil, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 275 Marconi, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 300 Neil, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 300 Spring, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 355 McConnell, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 425 Nationwide, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 500 Nationwide, LLC	..OH.....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	

ANNUAL STATEMENT FOR THE YEAR 2024 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	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	NWD Arena Crossing, LLC .....	.. OH.....	.. NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	NWD Arena District I, LLC .....	.. OH.....	.. NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	NWD Arena District II, LLC .....	.. OH.....	.. NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	NWD Arena District MM, LLC .....	.. OH.....	.. NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	NWD Arena District PW, LLC .....	.. OH.....	.. NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	NWD Arena District V, LLC .....	.. OH.....	.. NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	NWD Athletic Club, LLC .....	.. OH.....	.. NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	88-2975730 .....	.....	.....	.....	NW-Boise, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	NWD Brodbelt, LLC .....	.. OH.....	.. NIA.....	NWD Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	30-0876022 .....	.....	.....	.....	NWD Franklinton, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	80.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-4118665 .....	.....	.....	.....	NWD HP, LLC .....	.. OH.....	.. NIA.....	NWD Investments, LLC	Ownership.....	75.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 .....	.....	.....	.....	NWD Investments, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	80.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	NWGH, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	75.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	87-3124154 .....	.....	.....	.....	NW-Gallatin, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	92-2943602 .....	.....	.....	.....	NW-Holly Springs, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	86-2431839 .....	.....	.....	.....	NW-Hub13, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	92-3558072 .....	.....	.....	.....	NW-Huntersville, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	47-2482818 .....	.....	.....	.....	NW-Jasper WAG, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	87-3767006 .....	.....	.....	.....	NW-Kingsbury, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	81-5146596 .....	.....	.....	.....	NW-Logan, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	87-1565013 .....	.....	.....	.....	NW-Midtown, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	88-2595124 .....	.....	.....	.....	NW-OG, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	83-2260477 .....	.....	.....	.....	NW-ORBD, LLC .....	.. OH.....	.. NIA.....	NW REI (NMFIC), LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	93-1728625 .....	.....	.....	.....	NW-Pleasant Prairie, LLC .....	.. OH.....	.. NIA.....	NW REI (NLIC), LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	47-2449044 .....	.....	.....	.....	NW-Promenade at Madison, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	87-1367836 .....	.....	.....	.....	NW-Rancho, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	88-1405151 .....	.....	.....	.....	NW-Riverchase, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	86-3702669 .....	.....	.....	.....	NW-RPG Cranberry, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	87-3273918 .....	.....	.....	.....	NW-San Marco, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	87-3289289 .....	.....	.....	.....	NW-San Pablo, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	81-3212025 .....	.....	.....	.....	NW-Springfield, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	93-2022585 .....	.....	.....	.....	NW-Spring Hill, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	92-2878794 .....	.....	.....	.....	NW-SR-16, LLC .....	.. OH.....	.. NIA.....	NW REI, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	92-0677233 .....	.....	.....	.....	NW-UNCC, LLC .....	.. OH.....	.. NIA.....	NW REI (NLIC), LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	81-1603024 .....	.....	.....	.....	NW REI (NLAIC), LLC .....	.. OH.....	.. NIA.....	Nationwide Life and Annuity Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	81-1619428 .....	.....	.....	.....	NW REI (NLIC), LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	81-1861190 .....	.....	.....	.....	NW REI (NMIC), LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-0947092 .....	.....	.....	.....	OCH Company, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
.....	.....	.....	26-0263012 .....	.....	.....	.....	Old Track Street Owners Association, Inc. ...	.. OH.....	.. OTH.....	Other non-Nationwide	Other.....	0.000 ...	Other non-Nationwide .....	... NO.....	2
. 0140 ...	Nationwide ...	13999	27-1712056 .....	.....	.....	.....	Olentangy Reinsurance, LLC .....	.. VT.....	.. IA.....	Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company .....	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 .....	.....	.....	.....	Perimeter A, Ltd. ....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 .....	.....	.....	.....	Rail Street Parking, LLC .....	.. OH.....	.. NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Registered Investment Advisors Services, Inc.	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide ...	.....	75-2938844 .....	.....	.....	.....	.....	.. TX.....	.. NIA.....	Nationwide Financial Services, Inc.	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	82-0549218 .....	.....	.....	.....	Retention Alternatives Ltd. ....	.. BMJ.....	.. IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	15580	31-1117969 .....	.....	.....	.....	Scottsdale Indemnity Company .....	.. OH.....	.. RE.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	41297	31-1024978	Scottsdale Insurance Company OH.....	.. IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company NO.....

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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	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0140 ...	Nationwide .....	..... 10672	86-0835870 ..	.....	.....	.....	Scottsdale Surplus Lines Insurance Company ..	.. AZ.....	..... IA.....	Scottsdale Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	..... 31-1610040 ..	31-1610040 ..	.....	.....	.....	The Waterfront Partners, LLC .....	.. OH.....	..... NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	50.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	..... 36269	86-0619597 ..	.....	.....	.....	Titan Insurance Company .....	.. MI.....	..... IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	..... 75-1284530 ..	75-1284530 ..	.....	.....	.....	Titan Insurance Services, Inc. ....	.. TX.....	..... IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	..... 33-0160222 ..	33-0160222 ..	.....	.....	.....	V.P.I. Services, Inc. ....	.. CA.....	..... IA.....	Veterinary Pet Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	..... 42285	95-3750113 ..	.....	.....	.....	Veterinary Pet Insurance Company .....	.. OH.....	..... IA.....	Scottsdale Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	..... 42889	34-1394913 ..	.....	.....	.....	Victoria Fire & Casualty Company .....	.. OH.....	..... IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....
. 0140 ...	Nationwide .....	..... 10105	34-1777972 ..	.....	.....	.....	Victoria Select Insurance Company .....	.. OH.....	..... IA.....	Victoria Fire & Casualty Insurance Company	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	.... NO.....	.....

Asterisk	Explanation
1	Nationwide retains management responsibility for these entities, despite a minority ownership stake.
2	Other ownership indicates a non-ownership circumstance by a Nationwide entity.

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SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
.....	26-1903919	NW REI, LLC .....	.....	..... 41,783,657	.....	.....	.....	.....	.....	.....	..... 41,783,657	.....
.....	82-4282099	OYS Fund, LLC .....	..... 749,778	.....	.....	.....	.....	.....	.....	.....	..... 749,778	.....
.....	20-1169305	Prisma Polyphony Fund, LLC .....	..... 2,065,000	.....	.....	.....	.....	.....	.....	.....	..... 2,065,000	.....
..... 15580	31-1117969	Scottsdale Indemnity Company .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	..... 554,660,756
..... 41297	31-1024978	Scottsdale Insurance Company .....	.....	.....	.....	.....	.....	.....	*	.....	.....	..... 5,318,400,771
..... 10672	86-0835870	Scottsdale Surplus Lines Insurance Company .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	..... 79,306,381
..... 36269	86-0619597	Titan Insurance Company .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	..... (11,479)
..... 42285	95-3750113	Veterinary Pet Insurance Company .....	.....	..... (818,036)	.....	.....	.....	.....	*	.....	..... (818,036)	..... 153,865,640
..... 42889	34-1394913	Victoria Fire & Casualty Company .....	.....	.....	.....	.....	.....	.....	*	.....	.....	..... 1,768,723
..... 10105	34-1777972	Victoria Select Insurance Company .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	..... 312,864
9999999 Control Totals									XXX			

ANNUAL STATEMENT FOR THE YEAR 2024 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	2	3	4	5	6	7	8
		Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control/ Affiliation of Column 2 Over Column 1 (Yes/No)			Ownership Percentage (Column 5 of Column 6)	Granted Disclaimer of Control/ Affiliation of Column 5 Over Column 6 (Yes/No)
Insurers in Holding Company	Owners with Greater Than 10% Ownership			Ultimate Controlling Party	U.S. Insurance Groups or Entities Controlled by Column 5		
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 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 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 2024 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.

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

SUPPLEMENTAL FILINGS














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

MARCH FILING		
11.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?.....	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?.....	NO
14.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
15.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
16.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
17.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? ...	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 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
Explanations:		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
21.		
22.		
24.		
25.		
26.		
27.		
29.		
31.		
32.		
33.		
35.		
37.		

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

18.	Medicare Part D Coverage Supplement [Document Identifier 365]	 1 5 5 8 0 2 0 2 4 3 6 5 0 0 0 0 0 0
21.	Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 1 5 5 8 0 2 0 2 4 4 0 0 0 0 0 0 0 0
22.	Bail Bond Supplement [Document Identifier 500]	 1 5 5 8 0 2 0 2 4 5 0 0 0 0 0 0 0 0
24.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 1 5 5 8 0 2 0 2 4 2 2 4 0 0 0 0 0 0
25.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 1 5 5 8 0 2 0 2 4 2 2 5 0 0 0 0 0 0
26.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 1 5 5 8 0 2 0 2 4 2 2 6 0 0 0 0 0 0
27.	Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]	 1 5 5 8 0 2 0 2 4 5 5 5 0 0 0 0 0 0
29.	Market Conduct Annual Statement (MCAS) Premium Exhibit [Document Identifier 600]	 1 5 5 8 0 2 0 2 4 6 0 0 0 0 0 0 0 0
31.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 1 5 5 8 0 2 0 2 4 3 0 6 0 0 0 0 0 0
32.	Accident and Health Policy Experience Exhibit [Document Identifier 210]	 1 5 5 8 0 2 0 2 4 2 1 0 0 0 0 0 0 0
33.	Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]	 1 5 5 8 0 2 0 2 4 2 1 6 0 0 0 0 0 0
35.	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]	 1 5 5 8 0 2 0 2 4 2 9 0 0 0 0 0 0 0
37.	Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]	 1 5 5 8 0 2 0 2 4 5 6 5 0 0 0 0 0 0

NONE



SUPPLEMENT FOR THE YEAR 2024 OF THE SCOTTSDALE INDEMNITY COMPANY

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

For The Year Ended December 31, 2024
(To Be Filed by March 1)

NAIC Group Code0140NAIC Company Code15580

Company NameSCOTTSDALE 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 Claims Made	6 Occurrence
\$	\$	\$	\$	%	%



SUPPLEMENT FOR THE YEAR 2024 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	4,675	4,025		
2. Errors & omissions (E&O)	56,088,365	47,539,065	9,516,080	8,965,275
3. Directors & officers (D&O)	66,227,195	57,277,400	8,744,295	3,301,600
4. Environmental liability	68,883	69,772		
5. Excess workers' compensation				
6. Commercial excess & umbrella	10,030,329	16,921,462	23,898,028	35,838,693
7. Personal umbrella	8,315		6,930,274	8,710,000
8. Employment liability	64,632,016	54,321,716	21,920,594	14,160,573
9. Aggregate write-ins for facilities & premises (CGL)	19,447,271	15,466,670	12,642,973	21,041,664
10. Internet & cyber liability	600			
11. Aggregate write-ins for other	736			
12. Total ASL 17 - other liability (sum of lines 1 through 11)	216,508,385	191,600,110	83,652,244	92,017,805
DETAILS OF WRITE-INS				
0901. Premises and Operations Liability			12,564,223	20,991,664
0902. Aggregate of facilities & premises (CGL) lines of business less than 10% of category	19,447,271	15,466,670	78,750	50,000
0903.				
0998. Summary of remaining write-ins for Line 9 from overflow page				
0999. Totals (Lines 0901 through 0903 plus 0998)(Line 9 above)	19,447,271	15,466,670	12,642,973	21,041,664
1101. Aggregate of other lines of business less than 10% of category	736			
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	736			