



# QUARTERLY STATEMENT

As of September 30, 2016  
of the Condition and Affairs of the

## Medical Malpractice Joint Underwriting Association of Rhode Island

NAIC Group Code..... 0, 0 (Current Period) (Prior Period)	NAIC Company Code..... 13101	Employer's ID Number..... 51-0140354
Organized under the Laws of Rhode Island	State of Domicile or Port of Entry Rhode Island	Country of Domicile US
Incorporated/Organized..... June 16, 1975	Commenced Business..... July 1, 1975	
Statutory Home Office	One Turks Head Place..... Providence ..... RI ..... 02903 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	
Main Administrative Office	One Turks Head Place..... Providence ..... RI ..... 02903 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	401-369-8240 <i>(Area Code) (Telephone Number)</i>
Mail Address	One Turks Head Place..... Providence ..... RI ..... 02903 <i>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</i>	
Primary Location of Books and Records	One Turks Head Place..... Providence ..... RI ..... 02903 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	401-369-8240 <i>(Area Code) (Telephone Number)</i>
Internet Web Site Address		
Statutory Statement Contact	Jerilynn Leahy <i>(Name)</i> jleahy@beechercarlson.com <i>(E-Mail Address)</i>	401-369-8245 <i>(Area Code) (Telephone Number) (Extension)</i> 401-369-8241 <i>(Fax Number)</i>

### OFFICERS

Name	Title	Name	Title
1. Larry Alan	Secretary	2. Robert Suglia	Chair
3. Jerilynn Leahy	Assistant Secretary	4. Timothy Knapp	Vice Chair


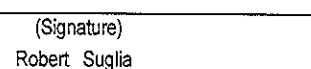
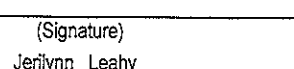
### OTHER

### DIRECTORS OR TRUSTEES

Daniel Wright	Krista Tropea #	James Pascalides DPM	Kenneth B Nanian MD
Robert Suglia	Earl Cottam Jr.	Timothy Knapp	Don Baldini
Larry Alan	Barbara M Cavicchio DDS		

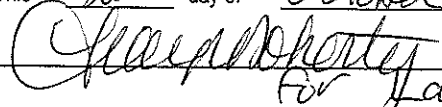
State of..... Connecticut  
County of..... Tolland

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

		
(Signature)	(Signature)	(Signature)
Larry Alan	Robert Suglia	Jerilynn Leahy
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
Secretary	Chair	Assistant Secretary
(Title)	(Title)	(Title)

Subscribed and sworn to before me  
This 21<sup>st</sup> day of October, 2016

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 \_\_\_\_\_

  
For Larry Alan only

**TRACY L. DOHERTY**  
NOTARY PUBLIC  
MY COMMISSION EXPIRES MAR. 31, 2020



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State of..... Rhode Island  
County of..... Providence

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(Signature)	(Signature)	(Signature)
Larry Alan	Robert Suglia	Jerilynn Leahy
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
Secretary	Chair	Assistant Secretary
(Title)	(Title)	(Title)

Subscribed and sworn to before me  
This 17th day of October, 2016

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 \_\_\_\_\_



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_____ (Signature) Larry Alan 1. (Printed Name) Secretary (Title)	_____ (Signature) Robert Suglia 2. (Printed Name) Chair (Title)	 (Signature) Jerilynn Leahy 3. (Printed Name) Assistant Secretary (Title)
---------------------------------------------------------------------------------	--------------------------------------------------------------------------------	------------------------------------------------------------------------------------------

Subscribed and sworn to before me  
This 20<sup>th</sup> day of October 2016

DONNA J. CACICCIA  
(my COMMISSION EXPIRES 9-18-18)

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 \_\_\_\_\_

**ASSETS**

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	93,392,440		93,392,440	93,728,443
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....			0	
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$.....1,393,457), cash equivalents (\$.....749,901) and short-term investments (\$.....257,378).....	2,400,736		2,400,736	1,855,461
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....	54,865,776		54,865,776	52,895,483
9. Receivables for securities.....	84		84	72
10. Securities lending reinvested collateral assets.....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	150,659,036	0	150,659,036	148,479,459
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	1,217,386		1,217,386	1,467,352
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	161,389		161,389	167,059
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	208,863		208,863	245,046
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....	41,583		41,583	1,370,896
18.2 Net deferred tax asset.....			0	184,241
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	16,781	0	16,781	8,906
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	152,305,038	0	152,305,038	151,922,959
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	152,305,038	0	152,305,038	151,922,959

**DETAILS OF WRITE-INS**

1101. ....			0	
1102. ....			0	
1103. ....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Miscellaneous Accounts Receivable.....	16,781		16,781	8,906
2502. Prepaid Losses.....			0	
2503. ....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	16,781	0	16,781	8,906

**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Statement Date	2 December 31 Prior Year
1. Losses (current accident year \$.....3,899,035).....	37,832,382	41,778,035
2. Reinsurance payable on paid losses and loss adjustment expenses.....		
3. Loss adjustment expenses.....	12,131,673	12,955,778
4. Commissions payable, contingent commissions and other similar charges.....	62,173	61,375
5. Other expenses (excluding taxes, licenses and fees).....	176,460	176,824
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....		
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....		
7.2 Net deferred tax liability.....	112,114	
8. Borrowed money \$.....0 and interest thereon \$.....0.....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$.....0 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	2,081,074	2,279,956
10. Advance premium.....	29,616	31,866
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....		
13. Funds held by company under reinsurance treaties.....		
14. Amounts withheld or retained by company for account of others.....	1,711,188	1,707,873
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....		
20. Derivatives.....		
21. Payable for securities.....		
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	0	131,000
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	54,136,680	59,122,707
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	54,136,680	59,122,707
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....		
31. Preferred capital stock.....		
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....		
34. Gross paid in and contributed surplus.....		
35. Unassigned funds (surplus).....	98,168,358	92,800,252
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36).....	98,168,358	92,800,252
38. Totals (Page 2, Line 28, Col. 3).....	152,305,038	151,922,959

**DETAILS OF WRITE-INS**

2501. Unearned Finance Charge.....		
2502. Premium Deficiency Reserve.....		
2503. Losses Payable.....		131,000
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	131,000
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

**STATEMENT OF INCOME**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>UNDERWRITING INCOME</b>			
1. Premiums earned:			
1.1 Direct..... (written \$....1,702,819).....	1,901,703	2,081,186	2,750,985
1.2 Assumed..... (written \$.....0).....			
1.3 Ceded..... (written \$.....0).....			
1.4 Net..... (written \$....1,702,819).....	1,901,703	2,081,186	2,750,985
DEDUCTIONS:			
2. Losses incurred (current accident year \$....3,899,035):			
2.1 Direct.....	(2,511,510)	976,575	1,634,614
2.2 Assumed.....			
2.3 Ceded.....			
2.4 Net.....	(2,511,510)	976,575	1,634,614
3. Loss adjustment expenses incurred.....	(37,477)	369,124	1,217,507
4. Other underwriting expenses incurred.....	1,280,228	1,417,454	1,908,472
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	(1,268,759)	2,763,153	4,760,593
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	3,170,462	(681,967)	(2,009,608)
<b>INVESTMENT INCOME</b>			
9. Net investment income earned.....	3,678,930	3,582,772	4,789,874
10. Net realized capital gains (losses) less capital gains tax of \$....318,875.....	618,993	366,196	449,456
11. Net investment gain (loss) (Lines 9 + 10).....	4,297,923	3,948,968	5,239,330
<b>OTHER INCOME</b>			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0).....	0		
13. Finance and service charges not included in premiums.....	20,314	22,486	28,216
14. Aggregate write-ins for miscellaneous income.....	(569,500)	(569,500)	(569,500)
15. Total other income (Lines 12 through 14).....	(549,186)	(547,014)	(541,284)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	6,919,199	2,719,987	2,688,438
17. Dividends to policyholders.....			
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	6,919,199	2,719,987	2,688,438
19. Federal and foreign income taxes incurred.....	1,685,438	468,274	279,129
20. Net income (Line 18 minus Line 19) (to Line 22).....	5,233,761	2,251,713	2,409,309
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
21. Surplus as regards policyholders, December 31 prior year.....	92,800,252	91,032,773	91,032,773
22. Net income (from Line 20).....	5,233,761	2,251,713	2,409,309
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$....146,438.....	284,262	(877,095)	(522,849)
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	(149,917)	(35,821)	(118,982)
27. Change in nonadmitted assets.....			
28. Change in provision for reinsurance.....			
29. Change in surplus notes.....			
30. Surplus (contributed to) withdrawn from protected cells.....			
31. Cumulative effect of changes in accounting principles.....			
32. Capital changes:			
32.1 Paid in.....			
32.2 Transferred from surplus (Stock Dividend).....			
32.3 Transferred to surplus.....			
33. Surplus adjustments:			
33.1 Paid in.....			
33.2 Transferred to capital (Stock Dividend).....			
33.3 Transferred from capital.....			
34. Net remittances from or (to) Home Office.....			
35. Dividends to stockholders.....			
36. Change in treasury stock.....			
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	5,368,106	1,338,797	1,767,478
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	98,168,358	92,371,570	92,800,252

**DETAILS OF WRITE-INS**

0501. Change in Premium Deficiency Reserve.....			
0502. ....			
0503. ....			
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401. Gain or loss on retroactive reinsurance.....	(569,500)	(569,500)	(569,500)
1402. ....			
1403. ....			
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	(569,500)	(569,500)	(569,500)
3701. ....			
3702. ....			
3703. ....			
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

**CASH FLOW**

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>CASH FROM OPERATIONS</b>			
1. Premiums collected net of reinsurance.....	1,742,424	2,168,430	2,751,845
2. Net investment income.....	4,368,930	4,313,468	5,438,410
3. Miscellaneous income.....	(560,185)	(708,932)	(705,405)
4. Total (Lines 1 through 3).....	5,551,169	5,772,966	7,484,850
5. Benefit and loss related payments.....	1,434,143	2,267,481	2,443,990
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	2,190,982	2,153,202	2,760,556
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	675,000	1,000,000	1,000,000
10. Total (Lines 5 through 9).....	4,300,125	5,420,683	6,204,546
11. Net cash from operations (Line 4 minus Line 10).....	1,251,044	352,283	1,280,304
<b>CASH FROM INVESTMENTS</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	13,991,732	12,853,599	16,210,831
12.2 Stocks.....			
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....		649,851	16
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	13,991,732	13,503,450	16,210,847
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	13,811,386	12,200,762	16,679,623
13.2 Stocks.....			
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....	886,115		804,110
13.7 Total investments acquired (Lines 13.1 to 13.6).....	14,697,501	12,200,762	17,483,733
14. Net increase or (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(705,769)	1,302,688	(1,272,886)
<b>CASH FROM FINANCING AND MISCELLANEOUS SOURCES</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			
16.6 Other cash provided (applied).....			
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	0	0	0
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	545,275	1,654,971	7,418
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	1,855,461	1,848,043	1,848,043
19.2 End of period (Line 18 plus Line 19.1).....	2,400,736	3,503,014	1,855,461

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

20.0001 .....			
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**NOTES TO FINANCIAL STATEMENTS****Note 1 - Summary of Significant Accounting Policies**

Medical Malpractice Joint Underwriting Association of Rhode Island ("the Association") is a joint underwriting association created by the state of Rhode Island. The Association was originally created in accordance with RI Gen. Law 42-35-3 by the adoption of Emergency Regulation XXI(21) by the Department of Business Regulation (the "Department") effective June 16, 1975. Subsequently, legislation was enacted which authorized the Department to promulgate regulations relating to medical malpractice insurance and validated Emergency Regulation XXI(21). It was the intent of the Department that the Association provides a continuing stable facility for medical malpractice insurance. Under the original plan of operation (approved June 25, 1975) and as amended and approved by the department on November 10, 2003, the Association was created to provide medical malpractice insurance for physicians, hospitals and other health care providers, on a self-supporting basis.

The Association is authorized to issue medical malpractice policies on a "claims made" or "occurrence" basis with limits not to exceed \$1,000,000 for each medical incident under one policy and in the aggregate of \$3,000,000 under one policy in any one year. The Association is also authorized to underwrite incidental coverage's for any health care provider that is also covered by the Association's medical malpractice, with limits of \$1,000,000 per incident and \$1,000,000 aggregate under a one year policy. Additionally, the Association is authorized to provide Commercial General Liability coverage to the health care providers with limits of \$1,000,000 per incident and \$2,000,000 aggregate under a one year policy. All policies are on an annual basis and shall be subject to the Group Retrospective Rating Plan and Stabilization Reserve Fund as authorized by Regulation 21. The Group Retrospective Rating Plan and stabilization reserve fund are described under Note 24.

## A. Accounting Practices, impact of NAIC/state differences

	State of Domicile	Current Period	Prior Year
<b>NET INCOME</b>			
(1) Medical Malpractice Joint Underwriting Association of Rhode Island state basis (Page 4, Line 20, Columns 1 & 3)	RI	\$ 5,233,761	\$ 2,409,309
(2) State Prescribed Practices that increase/decrease NAIC SAP			
(3) State Permitted Practices that increase/decrease NAIC SAP			
(4) NAIC SAP (1 - 2 - 3 = 4)	RI	\$ 5,233,761	\$ 2,409,309
<b>SURPLUS</b>			
(5) Medical Malpractice Joint Underwriting Association of Rhode Island state basis (Page 3, line 37, Columns 1 & 2)	RI	\$ 98,168,358	\$ 92,800,252
(6) State Prescribed Practices that increase/decrease NAIC SAP			
(7) State Permitted Practices that increase/decrease NAIC SAP			
(8) NAIC SAP (5 - 6 - 7 = 8)	RI	\$ 98,168,358	\$ 92,800,252

The accompanying financial statements of the Association have been prepared in conformity with accounting practices prescribed or permitted by the Department. Prescribed accounting practices include state laws, regulations and general administrative rules applicable to insurance companies domiciled in the State of Rhode Island; National Association of Insurance Commissioners' ("NAIC") *Annual Statement Instructions*; the NAIC *Accounting Practices and Procedures Manual*; the *Purposes and Procedures and Securities Valuation Manuals* of the NAIC Securities Valuation Office; NAIC official proceedings; and the NAIC *Examiner's and Market Conduct Handbooks*. Permitted statutory accounting practices encompass all accounting practices not so prescribed.

The Department requires insurance companies domiciled in the State of Rhode Island to prepare their statutory financial statements in accordance with the NAIC Accounting Practices and Procedures Manual and subject to Rhode Island Department of Business Regulation Gen. Law 42-35-3.

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

The preparation of financial statements in accordance with statutory accounting practices requires management to make estimates and assumptions that affect the reported amounts of admitted assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

## C. Accounting Policies

The Company uses the following accounting policies:

1. Short-term investments are stated at amortized cost.
2. Bonds generally are stated at amortized cost, except for bonds that are rated by the NAIC as a class 3 - 6 which are reported at the lower of amortized cost or fair market value. Amortization is calculated using the scientific constant yield to worst method.
3. The Association holds no investments in common stocks.
4. The Association holds no investments in preferred stocks.



**NOTES TO FINANCIAL STATEMENTS**

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5. The Association holds no investments in first lien mortgage loans on real estate.
6. Investment grade loan-backed securities are stated at amortized value. The retrospective adjustment method is used to value all loan-backed securities. Non-investment grade loan-backed securities are stated at the lower of amortized value or fair value.
7. The Association has no subsidiaries.
8. The Association holds no interest in joint ventures or partnerships.
9. The Association does not invest in derivative instruments.
10. The Association does not have a premium deficiency reserve.
11. The reserve for unpaid losses and loss adjustment expenses represents the estimated unpaid ultimate liability for claims reported to the Association plus claims incurred but not yet reported and the related estimated loss adjustment expenses. In establishing this reserve, the Association utilizes the findings of an independent consulting actuary. The reserves for unpaid losses and loss adjustment expenses are estimated using individual case basis valuations and statistical analyses. Those estimates are subject to the effects of trends in loss severity and frequency.
12. The Association does not have a capitalization policy.
13. Not applicable as the Association does not write major medical insurance with prescription drug coverage.

**Note 2 - Accounting Changes and Corrections of Errors**

No significant change

**Note 3 - Business Combinations and Goodwill**

Not applicable

**Note 4 - Discontinued Operations**

Not applicable

**Note 5 - Investments**

Not applicable

**Note 6 - Joint Ventures, Partnerships and Limited Liability Companies**

Not applicable

**Note 7 - Investment Income**

- A. The company does not admit investment income due and accrued if amounts are over 90 days past due (180 days for mortgage loans).
- B. Not applicable

**Note 8 - Derivative Instruments**

Not applicable

**Note 9 - Income Taxes**

No significant change

**Note 10 - Information Concerning Parent, Subsidiaries and Affiliates**

Not applicable

**Note 11 - Debt**

Not applicable

**Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**

Not applicable

**Note 13 - Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations**

Not applicable

**NOTES TO FINANCIAL STATEMENTS****Note 14 - Contingencies**

- A. Not applicable
- B. Not applicable
- C. Not applicable
- D. The association is contingently liable under certain structured settlement agreements. These unassigned annuity agreements were purchased for 31 claimants. In many of these cases, these structured settlements require payments in 2015 and beyond. The contingent liability reserve is verified with the annuity carriers and updated annually. The Association currently has one annuity with Executive Life Insurance of New York (ELNY) purchased prior to 1985 where ELNY has been in rehabilitation since 1991. On September 1, 2011, the Superintendent of Insurance for the State of New York petitioned the Supreme Court of Nassau County, New York, for an Approval of Restructuring Agreement for ELNY. Based on this petition, an Order to show cause hearing was held on March 15, 2012 as to why orders should not be made declaring ELNY to be insolvent, and converting the rehabilitation proceeding to a liquidation proceeding. On April 16, 2012, a move to liquidation was approved. It has been determined that the Association will be liable for 60.4% of this annuity value. The Association obtained quotes on purchasing a replacement annuity with qualified assignment and release, however, in evaluating the cost of such an annuity, the Association determined that it was financially prudent to retain the liability at this time and consider looking at alternatives in the future. During 2013, the Association booked its liability for the annuity, amounting to \$4,613,681. All annuities purchased after 1985 included a uniform qualified assignment and release from all future obligations. (See Note 27)
- E. Not applicable
- F. Not applicable

**Note 15 - Leases**

Not applicable

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

Not applicable

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

Not applicable

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

Not applicable

**Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**

The Association uses Beecher Carlson Insurance Services LLC as managing general agent. The FEIN for Beecher Carlson Insurance Services LLC is 95-3679538. Beecher Carlson Insurance Services LLC has an exclusive contract for all medical malpractice and general liability business written. The total direct premiums written in 2016 equal \$1,702,819. The terms of the contract give Beecher Carlson Insurance Services LLC authority for premium collection (P), claims adjustment (CA), claims payment (C), binding (B), reinsurance ceding (R) and underwriting authority (U).

**Note 20 - Fair Value Measurement**

## A. 1. Inputs Used for Assets and Liabilities Measured at Fair Value

The Company has categorized its assets and liabilities that are measured at fair value into the three-level fair value hierarchy as reflected in the table below. The three-level fair value hierarchy is based on the degree of subjective inherent in the valuation method by which fair value was determined. The three levels are defined as follows.

Level 1- Quoted Prices in Active Markets for Identical Assets and Liabilities: This category, for items measured at fair value on a recurring basis, includes exchange-traded preferred and common stocks. It also includes derivative liabilities for written call options on common stock which are also exchange traded. The estimated fair value of the equity securities and derivatives within this category are based on quoted prices in active markets and are thus classified as Level 1.

Level 2 - Significant Other Observable Inputs: This category for items measured at fair value on a recurring basis includes bonds, preferred stocks and common stocks which are not exchange-traded. The estimated fair values of some of these items were determined by independent pricing services using observable inputs. Others were based on quotes from markets which were not considered actively traded.

Level 3 - Significant Unobservable Inputs: The Company has no assets or liabilities measured at fair value in this category.

<b>Assets Measured at Fair Value</b>	<b><u>Level 1</u></b>	<b><u>Level 2</u></b>	<b><u>Level 3</u></b>	<b><u>Total</u></b>
Bonds	0	103,672	0	103,672

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred between Levels 1 and 2. This policy also applies to transfers into or out of Level 3 as stated in paragraph 3 below.

**NOTES TO FINANCIAL STATEMENTS**

## 2. Rollforward of Level 3 Items

The Company has no assets or liabilities measured at fair value in the Level 3 category.

## 3. Policy on Transfers Into and Out of Level 3

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred into or out of Level 3. During the current year, no transfers into or out of Level 3 were required.

## 4. Inputs and Techniques Used for Level 2 and Level 3 Fair Values

The Company measures items at Level 2 on a recurring basis. The estimated fair values of some of these items were determined by independent pricing services using observable inputs. Others were based on quotes from markets which were not considered actively traded.

The Company has no assets or liabilities measured at fair value in the Level 3 category.

## 5. Derivative Fair Values

Not applicable

## B. Other Fair Value Disclosures

Not applicable

## C. Fair Values for All Financial Instruments by Levels 1, 2 and 3

The table below reflects the fair values and admitted values of all admitted assets and liabilities that are financial instruments. The fair values are also categorized into the three-level fair value hierarchy as described above in Note 20A.

Type of Financial Instrument	Fair Value	Admitted Value	Level 1	Level 2	Level 3	Not Practical (Carrying Value)
Financial Instruments - assets						
Bonds	101,851,789	93,392,440	-	101,851,789	-	-
Cash, cash equivalents and short-term investments	2,400,736	2,400,736	2,400,736	-	-	-
Other invested assets	55,792,709	54,865,776	16,019,599	39,773,110	-	-
Total assets	160,045,234	150,658,952	18,420,335	141,624,899	-	-

## D. Financial Instruments for which Not Practicable to Estimate Fair Values

Not applicable

**Note 21 - Other Items**

## A. Extraordinary items

Not applicable

## B. Troubled debt restructuring for debtors

Not applicable

## C. Other disclosures

Not applicable

## D. Uncollectable premiums receivable

Not applicable

## E. Business interruption insurance recoveries

Not applicable

## F. State transferable and non-transferrable tax credits

Not applicable

**NOTES TO FINANCIAL STATEMENTS**

## G. Subprime mortgage related risk exposure

(1) The Company's exposure to subprime lending in the fixed maturity (bond) investment portfolio which contains securities collateralized by mortgages that have characteristics of subprime lending such as low FICO score, adjustable rate mortgages and alternative documentation mortgages. These investments are in the form of asset-backed securities and collateralized mortgage obligations which are collateralized by subprime mortgages. The carrying value of these investments is approximately \$104 thousand as of September 30, 2016.

(2) Direct exposure through investments in subprime mortgage loans (Schedule B)

Not applicable

(3) Direct exposure through other investments

	<u>Amortized Cost</u>	<u>Book/Adj. Carry Value</u>	<u>Fair Mkt Value</u>	<u>OTTI Recognized</u>
Residential MBS Sub Prime	104,384	103,672	103,672	

**Note 22 - Events Subsequent**

Not applicable

**Note 23 - Reinsurance**

A. Unsecured Reinsurance Recoverables

Not applicable

B. Reinsurance Recoverable in Dispute

Not applicable

C. Reinsurance Assumed and Ceded

Not applicable

D. Uncollectable Reinsurance

Not applicable

E. Commutation of Ceded Reinsurance

Not applicable

F. Retroactive Reinsurance

No significant change

G. Reinsurance Accounted for as a Deposit

Not applicable

H. Run-off Agreements

Not applicable

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not applicable

**Note 24 - Retrospectively Rated Contracts & Contracts Subject to Redetermination**

No significant change

**NOTES TO FINANCIAL STATEMENTS****Note 25 - Changes in Incurred Losses and Loss Adjustment Expenses**

Activity in the liability for unpaid losses and LAE is summarized as follows:

Losses & LAE (000's omitted)	9/30/2016	12/31/2015
Unpaid losses and LAE at beginning of year	54,734	55,302
Losses and LAE incurred in current year:	(2,549)	2,852
Income Statement amounts	(2,549)	2,852
Losses and LAE paid in current year:	(2,221)	(3,420)
Underwriting exhibits paid amounts	(2,221)	(3,420)
Unpaid losses and LAE at end of period	49,964	54,734

**Note 26 - Intercompany Pooling Arrangements**

Not applicable

**Note 27 - Structured Settlements**

- A. No significant change
- B. No significant change

**Note 28 - Health Care Receivables**

Not applicable

**Note 29 - Participating Policies**

Not applicable

**Note 30 - Premium Deficiency Reserves**

Not applicable

**Note 31 - High Deductibles**

Not applicable

**Note 32 - Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses**

Not applicable

**Note 33 - Asbestos/Environmental Reserves**

Not applicable

**Note 34 - Subscriber Savings Accounts**

Not applicable

**Note 35 - Multiple Peril Crop Insurance**

Not applicable

**Note 36 - Financial Guarantee Insurance**

Not applicable

**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES**

**GENERAL**

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [ ] No [ X ]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [ ] No [ ]
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [ ] No [ X ]
- 2.2 If yes, date of change: \_\_\_\_\_
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? If yes, complete Schedule Y, Parts 1 and 1A. Yes [ ] No [ X ]
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [ ] No [ X ]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [ ] No [ X ]
- 4.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? If yes, attach an explanation. Yes [ ] No [ X ] N/A [ ]
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2015
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2010
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 04/11/2012
- 6.4 By what department or departments?  
State of Rhode Island Department of Business Regulation, Insurance Division
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [ X ] No [ ] N/A [ ]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [ X ] No [ ] N/A [ ]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [ ] No [ X ]
- 7.2 If yes, give full information:
- 8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board? Yes [ ] No [ X ]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

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

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

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [ X ] No [ ]
  - (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
  - (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
  - (c) Compliance with applicable governmental laws, rules and regulations;
  - (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
  - (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended? Yes [ ] No [ X ]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [ ] No [ X ]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

**FINANCIAL**

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

**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES**

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 0

**INVESTMENT**

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [ ] No [ X ]

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ 0

13. Amount of real estate and mortgages held in short-term investments: \$ 0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [ ] No [ X ]

14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$ 0	\$ 0
14.22 Preferred Stock	0	0
14.23 Common Stock	0	0
14.24 Short-Term Investments	0	0
14.25 Mortgage Loans on Real Estate	0	0
14.26 All Other	0	0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$ 0	\$ 0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$ 0	\$ 0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [ ] No [ X ]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ]

If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0

16.3 Total payable for securities lending reported on the liability page: \$ 0

17. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*? Yes [ X ] No [ ]

17.1 For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian Address
The Washington Trust Company	23 Broad Street, Westerly, RI 02891

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [ X ] No [ ]

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

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
Bank of America	The Washington Trust Company	07/01/2016	Consolidation of asset custody.

17.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
107423	Conning Inc.	One Financial Plaza, Hartford, CT 06103-2627

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

18.2 If no, list exceptions:

## GENERAL INTERROGATORIES (continued)

## PART 2 – PROPERTY &amp; CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? Yes [ ] No [ ] N/A [X]  
If yes, attach an explanation.
2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? Yes [ ] No [X]  
If yes, attach an explanation.
- 3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? Yes [ ] No [X]
- 3.2 If yes, give full and complete information thereto:
- 4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see *Annual Statement Instructions* pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero? Yes [ ] No [X]
- 4.2 If yes, complete the following schedule:

1 Line of Business	2 Maximum Interest	3 Disc. Rate	Total Discount				Discount Taken During Period			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 Total	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 Total
	0.000	0.000	0	0	0	0	0	0	0	0
Total	XXX	XXX	0	0	0	0	0	0	0	0

- 5.1 Operating Percentages:
- 5.1 A&H loss percent 0.000%
- 5.2 A&H cost containment percent 0.000%
- 5.3 A&H expense percent excluding cost containment expenses 0.000%
- 6.1 Do you act as a custodian for health savings accounts? Yes [ ] No [X]
- 6.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$ 0
- 6.3 Do you act as an administrator for health savings accounts? Yes [ ] No [X]
- 6.4 If yes, please provide the amount of funds administered as of the reporting date. \$ 0



**SCHEDULE F - CEDED REINSURANCE**

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
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**NONE**

**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year to Date	3 Prior Year to Date	4 Current Year to Date	5 Prior Year to Date	6 Current Year to Date	7 Prior Year to Date
1. Alabama.....AL	N						
2. Alaska.....AK	N						
3. Arizona.....AZ	N						
4. Arkansas.....AR	N						
5. California.....CA	N						
6. Colorado.....CO	N						
7. Connecticut.....CT	N						
8. Delaware.....DE	N						
9. District of Columbia.....DC	N						
10. Florida.....FL	N						
11. Georgia.....GA	N						
12. Hawaii.....HI	N						
13. Idaho.....ID	N						
14. Illinois.....IL	N						
15. Indiana.....IN	N						
16. Iowa.....IA	N						
17. Kansas.....KS	N						
18. Kentucky.....KY	N						
19. Louisiana.....LA	N						
20. Maine.....ME	N						
21. Maryland.....MD	N						
22. Massachusetts.....MA	N						
23. Michigan.....MI	N						
24. Minnesota.....MN	N						
25. Mississippi.....MS	N						
26. Missouri.....MO	N						
27. Montana.....MT	N						
28. Nebraska.....NE	N						
29. Nevada.....NV	N						
30. New Hampshire.....NH	N						
31. New Jersey.....NJ	N						
32. New Mexico.....NM	N						
33. New York.....NY	N						
34. North Carolina.....NC	N						
35. North Dakota.....ND	N						
36. Ohio.....OH	N						
37. Oklahoma.....OK	N						
38. Oregon.....OR	N						
39. Pennsylvania.....PA	N						
40. Rhode Island.....RI	L	1,702,819	2,266,373	1,434,144	2,267,482	37,832,382	41,296,505
41. South Carolina.....SC	N						
42. South Dakota.....SD	N						
43. Tennessee.....TN	N						
44. Texas.....TX	N						
45. Utah.....UT	N						
46. Vermont.....VT	N						
47. Virginia.....VA	N						
48. Washington.....WA	N						
49. West Virginia.....WV	N						
50. Wisconsin.....WI	N						
51. Wyoming.....WY	N						
52. American Samoa.....AS	N						
53. Guam.....GU	N						
54. Puerto Rico.....PR	N						
55. US Virgin Islands.....VI	N						
56. Northern Mariana Islands.....MP	N						
57. Canada.....CAN	N						
58. Aggregate Other Alien.....OT	XXX	0	0	0	0	0	0
59. Totals.....	(a).....1	1,702,819	2,266,373	1,434,144	2,267,482	37,832,382	41,296,505

**DETAILS OF WRITE-INS**

58001.....	XXX						
58002.....	XXX						
58003.....	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page.....	XXX	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above).....	XXX	0	0	0	0	0	0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;

(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

**Sch. Y - Pt. 1**  
**NONE**

**Sch. Y - Pt. 1A**  
**NONE**

**PART 1 - LOSS EXPERIENCE**

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....			0.000	
2. Allied lines.....			0.000	
3. Farmowners multiple peril.....			0.000	
4. Homeowners multiple peril.....			0.000	
5. Commercial multiple peril.....			0.000	
6. Mortgage guaranty.....			0.000	
8. Ocean marine.....			0.000	
9. Inland marine.....			0.000	
10. Financial guaranty.....			0.000	
11.1. Medical professional liability - occurrence.....	1,263,267	(2,479,242)	(196.256)	(7.951)
11.2. Medical professional liability - claims-made.....	427,178	87,382	20.456	168.603
12. Earthquake.....			0.000	
13. Group accident and health.....			0.000	
14. Credit accident and health.....			0.000	
15. Other accident and health.....			0.000	
16. Workers' compensation.....			0.000	
17.1. Other liability-occurrence.....	211,258	(119,650)	(56.637)	116.025
17.2. Other liability-claims made.....			0.000	
17.3. Excess workers' compensation.....			0.000	
18.1. Products liability-occurrence.....			0.000	
18.2. Products liability-claims made.....			0.000	
19.1, 19.2 Private passenger auto liability.....			0.000	
19.3, 19.4 Commercial auto liability.....			0.000	
21. Auto physical damage.....			0.000	
22. Aircraft (all perils).....			0.000	
23. Fidelity.....			0.000	
24. Surety.....			0.000	
26. Burglary and theft.....			0.000	
27. Boiler and machinery.....			0.000	
28. Credit.....			0.000	
29. International.....			0.000	
30. Warranty.....			0.000	
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0.000	
35. Totals.....	1,901,703	(2,511,510)	(132.066)	46.924

**DETAILS OF WRITE-INS**

3401.....			0.0	
3402.....			0.0	
3403.....			0.0	
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.0	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0.0	

**PART 2 - DIRECT PREMIUMS WRITTEN**

Lines of Business	1	2	3
	Current Quarter	Current Year to Date	Prior Year Year to Date
1. Fire.....			
2. Allied lines.....			
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....			
5. Commercial multiple peril.....			
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....			
10. Financial guaranty.....			
11.1. Medical professional liability - occurrence.....	423,508	1,041,396	1,433,869
11.2. Medical professional liability - claims made.....	147,575	417,285	485,041
12. Earthquake.....			
13. Group accident and health.....			
14. Credit accident and health.....			
15. Other accident and health.....			
16. Workers' compensation.....			
17.1. Other liability-occurrence.....	54,802	244,138	347,463
17.2. Other liability-claims made.....			
17.3. Excess workers' compensation.....			
18.1. Products liability-occurrence.....			
18.2. Products liability-claims made.....			
19.1 19.2 Private passenger auto liability.....			
19.3 19.4 Commercial auto liability.....			
21. Auto physical damage.....			
22. Aircraft (all perils).....			
23. Fidelity.....			
24. Surety.....			
26. Burglary and theft.....			
27. Boiler and machinery.....			
28. Credit.....			
29. International.....			
30. Warranty.....			
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0
35. Totals.....	625,885	1,702,819	2,266,373

**DETAILS OF WRITE-INS**

3401.....			
3402.....			
3403.....			
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0

**Medical Malpractice Joint Underwriting Association of Rhode Island**

**PART 3 (000 omitted)**

**LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE**

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2016 Loss and LAE Payments on Claims Reported as of Prior Year-End	2016 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2016 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols. 7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/Deficiency (Cols. 11 + 12)
1. 2013 + Prior.....	16,670	24,644	41,314	1,989	17	2,006	13,756	473	17,343	31,572	(925)	(6,811)	(7,736)
2. 2014.....	525	6,150	6,675	62	1	63	487	149	5,383	6,019	24	(617)	(593)
3. Subtotals 2014 + Prior.....	17,195	30,794	47,989	2,051	18	2,069	14,243	622	22,726	37,591	(901)	(7,428)	(8,329)
4. 2015.....	1,334	5,411	6,745	88		88	1,253	75	5,583	6,911	7	247	254
5. Subtotals 2015 + Prior.....	18,529	36,205	54,734	2,139	18	2,157	15,496	697	28,309	44,502	(894)	(7,181)	(8,075)
6. 2016.....	XXX	XXX	XXX	XXX	64	64	XXX	922	4,540	5,462	XXX	XXX	XXX
7. Totals.....	18,529	36,205	54,734	2,139	82	2,221	15,496	1,619	32,849	49,964	(894)	(7,181)	(8,075)
8. Prior Year-End's Surplus As Regards Policyholders.....	92,800												
											Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. ....(004.8)%	2. ....(19.834)%	3. ....(14.753)%
													Col. 13, Line 7 Line 8
													4. ....(8.701)%

Q14

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	<b>Response</b>
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	YES
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

**Explanation:**

1. The data for this supplement is not required to be filed.
- 2.
3. The data for this supplement is not required to be filed.
4. The data for this supplement is not required to be filed.

**Bar Code:**



**NONE**

**SCHEDULE A - VERIFICATION**

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Current year change in encumbrances.....		
4. Total gain (loss) on disposals.....		
5. Deduct amounts received on disposals.....		
6. Total foreign exchange change in book/adjusted carrying value.....		
7. Deduct current year's other-than-temporary impairment recognized.....		
8. Deduct current year's depreciation.....		
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	0	0
10. Deduct total nonadmitted amounts.....		
11. Statement value at end of current period (Line 9 minus Line 10).....	0	0

NONE

**SCHEDULE B - VERIFICATION**

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and mortgage interest points and commitment fees.....		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Total valuation allowance.....		
13. Subtotal (Line 11 plus Line 12).....	0	0
14. Deduct total nonadmitted amounts.....		
15. Statement value at end of current period (Line 13 minus Line 14).....	0	0

NONE

**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	52,895,483	51,992,085
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....	1,851,409	1,486,852
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....	169,141	(530,636)
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and depreciation.....	50,257	52,818
9. Total foreign exchange change in book/adjusted carrying value.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	54,865,776	52,895,483
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	54,865,776	52,895,483

**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	93,728,443	94,098,332
2. Cost of bonds and stocks acquired.....	13,811,387	16,679,623
3. Accrual of discount.....	63,911	76,718
4. Unrealized valuation increase (decrease).....	260,840	(261,558)
5. Total gain (loss) on disposals.....	(26,633)	(2,246)
6. Deduct consideration for bonds and stocks disposed of.....	13,991,725	16,210,831
7. Deduct amortization of premium.....	453,783	651,595
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	93,392,440	93,728,443
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	93,392,440	93,728,443



**SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity  
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a).....	80,460,923	4,075,386	5,016,041	(135,395)	81,885,782	80,460,923	79,384,873	81,311,674
2. NAIC 2 (a).....	14,617,539	1,196,932	899,776	(3,522)	12,661,887	14,617,539	14,911,173	12,099,540
3. NAIC 3 (a).....	114,167		10,428	(67)	204,000	114,167	103,672	348,750
4. NAIC 4 (a).....	267,000		318,862	51,862	207,000	267,000	0	
5. NAIC 5 (a).....	1				120,923	1	1	128,530
6. NAIC 6 (a).....							0	
7. Total Bonds.....	95,459,630	5,272,318	6,245,107	(87,122)	95,079,592	95,459,630	94,399,719	93,888,494
<b>PREFERRED STOCK</b>								
8. NAIC 1.....							0	
9. NAIC 2.....							0	
10. NAIC 3.....							0	
11. NAIC 4.....							0	
12. NAIC 5.....							0	
13. NAIC 6.....							0	
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	95,459,630	5,272,318	6,245,107	(87,122)	95,079,592	95,459,630	94,399,719	93,888,494

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(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$.....1,007,279; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

**SCHEDULE DA - PART 1**

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999.....	257,378	XXX.....	257,378		

**SCHEDULE DA - VERIFICATION**

Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	160,051	
2. Cost of short-term investments acquired.....	4,135,315	4,940,906
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	4,037,988	4,780,855
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	257,378	160,051
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	257,378	160,051

**Sch. DB - Pt. A - Verification  
NONE**

**Sch. DB - Pt. B - Verification  
NONE**

**Sch. DB - Pt. C - Sn. 1  
NONE**

**Sch. DB - Pt. C - Sn. 2  
NONE**

**Sch. DB - Verification  
NONE**

**SCHEDULE E- VERIFICATION**

Cash Equivalents

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	1,043,725
2. Cost of cash equivalents acquired.....	749,806	3,526,200
3. Accrual of discount.....	95	
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....		4,569,405
7. Deduct amortization of premium.....		520
8. Total foreign exchange change in book/ adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	749,901	0
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	749,901	0

**Sch. A - Pt. 2**  
**NONE**

**Sch. A - Pt. 3**  
**NONE**

**Sch. B - Pt. 2**  
**NONE**

**Sch. B - Pt. 3**  
**NONE**

**Sch. BA - Pt. 2**  
**NONE**

**Sch. BA - Pt. 3**  
**NONE**

**SCHEDULE D - PART 3**

Show all Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
<b>Bonds - U.S. Special Revenue and Special Assessment</b>									
3128ME XR 7	FG G15888.....		09/23/2016...	J.P. MORGAN.....		210,668	200,576	451	1.....
3128MJ YM 6	FG G08715.....		07/29/2016...	BNP PARIBUS SECURITIES.....		207,516	199,475	166	1.....
3138ET 2J 4	FN AL8876.....		08/30/2016...	CITIGROUP GLOBAL MARKETS.....		257,352	247,306	618	1.....
3138WG DN 1	FN AS6408.....		07/11/2016...	J.P. MORGAN.....		209,843	198,433	251	1.....
735352 QF 6	PORT SAINT LUCIE FL UTILITY RE.....		08/11/2016...	CITIGROUP GLOBAL MARKETS.....		420,979	375,000		1FE.....
3199999	Total Bonds - U.S. Special Revenue and Special Assessment.....					1,306,358	1,220,790	1,486	XXX
<b>Bonds - Industrial and Miscellaneous</b>									
025932 AK 0	AMERICAN FINANCIAL GROUP.....		08/15/2016...	J.P. MORGAN.....		124,510	125,000		2FE.....
03076C AH 9	AMERIPRISE FINANCIAL INC.....		08/08/2016...	WELLS FARGO SECURITIES LLC.....		249,733	250,000		1FE.....
25466A AJ 0	DISCOVER BANK.....		07/21/2016...	CITIGROUP GLOBAL MARKETS.....		449,510	450,000		2FE.....
46623E KG 3	JPMORGAN CHASE & CO.....		08/03/2016...	J.P. MORGAN.....		200,000	200,000		1FE.....
594918 BQ 6	MICROSOFT CORP.....		08/01/2016...	BANK AMERICA.....		348,954	350,000		1FE.....
06367T HQ 6	BANK OF MONTREAL.....	A	07/13/2016...	BMO CAPITAL MARKETS - US.....		499,520	500,000		1FE.....
88167A AD 3	TEVA PHARMACEUTICALS NE.....	F	07/18/2016...	BARCLAYS AMERICAN.....		622,913	625,000		2FE.....
3899999	Total Bonds - Industrial and Miscellaneous.....					2,495,140	2,500,000	0	XXX
8399997	Total Bonds - Part 3.....					3,801,498	3,720,790	1,486	XXX
8399999	Total Bonds.....					3,801,498	3,720,790	1,486	XXX
9999999	Total Bonds, Preferred and Common Stocks.....					3,801,498	XXX	1,486	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues:.....0.

QE04

**SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For re ign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Design- ation or Market Indicator (a)
<b>Bonds - U.S. Government</b>																					
36202E	UM 9 G2 4188		09/01/2016	MBS PAYMENT		.36	.36	.36	.36				.0		.36			.0	.1	07/20/2038	1
36205K	WE 8 GN 393145		09/01/2016	MBS PAYMENT		.502	.502	.500	.502				.0		.502			.0	.25	05/15/2024	1
36208C	7L 5 GN 447399		09/01/2016	MBS PAYMENT		.240	.240	.244	.240				.0		.240			.0	.12	07/15/2027	1
36210A	VC 8 GN 486711		09/01/2016	MBS PAYMENT		.397	.397	.394	.397		.1		.1		.397			.0	.16	11/15/2028	1
0599999. Total Bonds - U.S. Government						1,175	1,175	1,174	1,175	.0	.1	.0	.1	.0	1,175	.0	.0	.0	.54	XXX	XXX
<b>Bonds - U.S. Special Revenue and Special Assessment</b>																					
155048	CG 4 CENTRL PUGET SOUND WA REGL TRA		09/12/2016	CABRERA CAPITAL MARKETS		623,315	550,000	680,493	628,545		(13,258)		(13,258)		615,286		8,029	8,029	30,861	02/01/2020	1FE
3128GW	SY 5 FG E92335		09/01/2016	MBS PAYMENT		.605	.605	.627	.608		(3)		(3)		.605			.0	.22	11/01/2017	1
3128K6	7K 0 FG A46298		09/01/2016	MBS PAYMENT		4,430	4,430	4,475	4,440		(10)		(10)		4,430			.0	.152	07/01/2035	1
3128KV	MN 2 FG A64865		09/01/2016	MBS PAYMENT		.515	.515	.520	.516		(1)		(1)		.515			.0	.21	08/01/2037	1
3128M4	4Q 3 FG G03231		09/01/2016	MBS PAYMENT		9,822	9,822	9,675	9,794		.29		.29		9,822			.0	.375	08/01/2037	1
3128M5	UZ 1 FG G03900		09/01/2016	MBS PAYMENT		1,843	1,843	1,832	1,841		.1		.1		1,843			.0	.67	02/01/2038	1
3128M7	XB 7 FG G05774		09/01/2016	MBS PAYMENT		8,926	8,926	9,480	8,994		(68)		(68)		8,926			.0	.301	01/01/2040	1
3128M8	AZ 7 FG G06024		09/01/2016	MBS PAYMENT		6,304	6,304	6,656	6,345		(41)		(41)		6,304			.0	.191	08/01/2040	1
3128MJ	R3 6 FG G08505		09/01/2016	MBS PAYMENT		34,977	34,977	36,720	35,108		(131)		(131)		34,977			.0	.711	09/01/2042	1
3128MJ	U3 2 FG G08601		09/01/2016	MBS PAYMENT		16,209	16,209	17,338	16,383		(174)		(174)		16,209			.0	.439	08/01/2044	1
3128MJ	X4 7 FG G08698		09/01/2016	MBS PAYMENT		11,099	11,099	11,587	11,807		(13)		(13)		11,099			.0	.141	03/01/2046	1
3128MJ	X5 4 FG G08699		09/01/2016	MBS PAYMENT		10,996	10,996	11,802	11,802		(11)		(11)		10,996			.0	.84	03/01/2046	1
3128MJ	YM 6 FG G08715		09/01/2016	MBS PAYMENT		.955	.955	.993	.993		.0		.0		.955			.0	.2	08/01/2046	1
3128PQ	ZH 7 FG J11644		09/01/2016	MBS PAYMENT		5,476	5,476	5,574	5,494		(18)		(18)		5,476			.0	.151	02/01/2025	1
3128PY	JD 7 FG J18360		09/01/2016	MBS PAYMENT		13,156	13,156	13,604	13,212		(56)		(56)		13,156			.0	.264	03/01/2027	1
3128QJ	UC 8 FH 1G1479		09/01/2016	VARIOUS		.246	.246	.249	.246		.0		.0		.246			.0	.5	01/01/2037	1
31292H	VU 5 FG C01527		09/01/2016	MBS PAYMENT		4,433	4,433	4,512	4,444		(11)		(11)		4,433			.0	.159	04/01/2033	1
31292L	KQ 7 FG C03903		09/01/2016	MBS PAYMENT		18,483	18,483	18,491	18,483		(1)		(1)		18,483			.0	.449	04/01/2042	1
31292L	L6 0 FG C03949		09/01/2016	MBS PAYMENT		9,270	9,270	9,509	9,290		(20)		(20)		9,270			.0	.216	05/01/2042	1
312940	2H 1 FG A92576		09/01/2016	MBS PAYMENT		8,095	8,095	8,311	8,127		(32)		(32)		8,095			.0	.242	07/01/2040	1
312941	NJ 2 FG A93093		09/01/2016	MBS PAYMENT		12,411	12,411	13,058	12,492		(81)		(81)		12,411			.0	.381	07/01/2040	1
312942	NF 8 FG A93990		09/01/2016	MBS PAYMENT		8,117	8,117	8,397	8,156		(38)		(38)		8,117			.0	.218	09/01/2040	1
31294M	DW 8 FG E02817		09/01/2016	MBS PAYMENT		8,507	8,507	8,283	8,478		.29		.29		8,507			.0	.168	01/01/2026	1
312964	DE 6 FG B11901		09/01/2016	MBS PAYMENT		4,740	4,740	4,855	4,755		(15)		(15)		4,740			.0	.158	01/01/2019	1
312964	H5 1 FG B12052		09/01/2016	MBS PAYMENT		5,146	5,146	5,279	5,166		(21)		(21)		5,146			.0	.167	01/01/2019	1
31296M	PA 1 FG A13117		09/01/2016	MBS PAYMENT		3,173	3,173	3,139	3,168		.4		.4		3,173			.0	.102	09/01/2033	1
31296Q	4R 8 FG A16232		09/01/2016	MBS PAYMENT		.967	.967	.986	.968		(1)		(1)		.967			.0	.35	11/01/2033	1
3132GL	VB 7 FG Q05410		09/01/2016	MBS PAYMENT		14,178	14,178	14,176	14,178		.0		.0		14,178			.0	.318	01/01/2042	1
3132J2	5H 2 FG K90848		09/01/2016	MBS PAYMENT		5,788	5,788	6,010	5,810		(22)		(22)		5,788			.0	.118	07/01/2033	1
31335A	QK 7 FG G60458		09/01/2016	MBS PAYMENT		19,125	19,125	20,126	19,125		(52)		(52)		19,125			.0	.225	01/01/2044	1
31335A	UL 0 FG G60587		09/01/2016	MBS PAYMENT		3,936	3,936	4,210	3,936		(5)		(5)		3,936			.0	.30	02/01/2046	1
31335H	5U 3 FG C90859		09/01/2016	MBS PAYMENT		2,960	2,960	3,042	2,974		(14)		(14)		2,960			.0	.107	10/01/2024	1
31371G	SS 0 FN 251729		09/01/2016	MBS PAYMENT		1,193	1,193	1,186	1,190		.2		.2		1,193			.0	.51	05/01/2018	1
31371H	B6 4 FN 252161		09/01/2016	MBS PAYMENT		4,143	4,143	4,094	4,136		.6		.6		4,143			.0	.170	12/01/2028	1
31371K	A4 3 FN 253927		09/01/2016	MBS PAYMENT		.112	.112	.112	.112		.0		.0		.112			.0	.5	07/01/2031	1
31371M	CG 0 FN 255771		09/01/2016	MBS PAYMENT		4,216	4,216	4,299	4,225		(8)		(8)		4,216			.0	.178	07/01/2035	1
3138AN	CW 1 FN A18184		09/01/2016	MBS PAYMENT		19,342	19,342	20,279	19,438		(96)		(96)		19,342			.0	.514	08/01/2041	1
3138AN	YU 1 FN A18822		09/01/2016	MBS PAYMENT		6,561	6,561	6,953	6,597		(35)		(35)		6,561			.0	.190	08/01/2041	1
3138AV	TB 1 FN AJ4145		09/01/2016	MBS PAYMENT		9,327	9,327	9,731	9,363		(36)		(36)		9,327			.0	.256	11/01/2041	1

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**SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For re ig n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Design- ation or Market Indicator (a)
3138AW RQ 8	FN AJ4994		09/01/2016	MBS PAYMENT		12,420	12,420	13,368	12,548		(128)		(128)		12,420			0	377	11/01/2041	1
3138EO SF 7	FN AJ7717		09/01/2016	MBS PAYMENT		9,775	9,775	10,075	9,813		(38)		(38)		9,775			0	197	12/01/2026	1
3138EG HX 5	FN AL0245		09/01/2016	MBS PAYMENT		7,653	7,653	7,885	7,673		(20)		(20)		7,653			0	210	04/01/2041	1
3138EH US 9	FN AL1492		09/01/2016	MBS PAYMENT		13,980	13,980	14,625	14,042		(61)		(61)		13,980			0	360	03/01/2042	1
3138EJ 3Y 2	FN AL2614		09/01/2016	MBS PAYMENT		5,526	5,526	5,714	5,539		(14)		(14)		5,526			0	130	11/01/2042	1
3138EJ RA 8	FN AL2280		09/01/2016	MBS PAYMENT		17,842	17,842	18,999	18,012		(170)		(170)		17,842			0	511	09/01/2042	1
3138EK FB 6	FN AL2861		09/01/2016	MBS PAYMENT		12,563	12,563	12,905	12,594		(31)		(31)		12,563			0	292	12/01/2042	1
3138EK HJ 7	FN AL2932		09/01/2016	MBS PAYMENT		2,920	2,920	3,071	2,932		(12)		(12)		2,920			0	80	07/01/2042	1
3138EK YW 9	FN AL3424		09/01/2016	MBS PAYMENT		13,508	13,508	14,179	13,576		(68)		(68)		13,508			0	366	01/01/2043	1
3138ET 2J 4	FN AL8876		09/01/2016	MBS PAYMENT		4,458	4,458	4,639							4,458			0	11	10/01/2044	1
3138LR AE 2	FN AO0904		09/01/2016	MBS PAYMENT		3,003	3,003	3,087	3,011		(8)		(8)		3,003			0	74	04/01/2042	1
3138LU SX 4	FN AO4133		09/01/2016	MBS PAYMENT		11,885	11,885	11,873	11,884		1		1		11,885			0	280	06/01/2042	1
3138MK 2E 5	FN AO4372		09/01/2016	MBS PAYMENT		7,030	7,030	7,022	7,029		1		1		7,030			0	117	11/01/2027	1
3138W0 L6 4	FN AR3048		09/01/2016	MBS PAYMENT		6,224	6,224	6,174	6,218		5		5		6,224			0	100	01/01/2028	1
3138W4 CR 0	FN AR6379		09/01/2016	MBS PAYMENT		13,831	13,831	14,317	13,861		(30)		(30)		13,831			0	272	02/01/2043	1
3138W9 HW 3	FN AS0244		09/01/2016	MBS PAYMENT		7,125	7,125	7,371	7,150		(25)		(25)		7,125			0	196	08/01/2043	1
3138W9 KR 0	FN AS0303		09/01/2016	MBS PAYMENT		7,596	7,596	7,572	7,595		1		1		7,596			0	154	08/01/2043	1
3138W9 MT 4	FN AS0369		09/01/2016	MBS PAYMENT		19,751	19,751	21,165	19,968		(217)		(217)		19,751			0	561	09/01/2043	1
3138WA FR 3	FN AS1075		09/01/2016	MBS PAYMENT		5,982	5,982	6,165	5,997		(14)		(14)		5,982			0	120	11/01/2043	1
3138WA WT 0	FN AS1557		09/01/2016	MBS PAYMENT		23,400	23,400	24,855	23,552		(152)		(152)		23,400			0	628	01/01/2044	1
3138WB UK 9	FN AS2385		09/01/2016	MBS PAYMENT		13,382	13,382	14,128	13,430		(48)		(48)		13,382			0	378	05/01/2044	1
3138WE ZJ 1	FN AS5244		09/01/2016	MBS PAYMENT		8,663	8,663	8,973	8,684		(21)		(21)		8,663			0	200	06/01/2045	1
3138WG DN 1	FN AS6408		09/01/2016	MBS PAYMENT		6,760	6,760	7,149			(3)		(3)		6,760			0	32	01/01/2046	1
3138WG HY 3	FN AS6546		09/01/2016	MBS PAYMENT		3,789	3,789	3,910			(3)		(3)		3,789			0	22	01/01/2031	1
3138WM KY 6	FN AT0310		09/01/2016	MBS PAYMENT		18,268	18,268	19,455	18,328		(60)		(60)		18,268			0	461	03/01/2043	1
3138WX FK 8	FN AT9169		09/01/2016	MBS PAYMENT		12,978	12,978	12,902	12,971		7		7		12,978			0	211	07/01/2028	1
3138WZ TZ 5	FN AU0567		09/01/2016	MBS PAYMENT		5,230	5,230	5,179	5,225		4		4		5,230			0	125	08/01/2043	1
3138X0 Y2 8	FN AU1628		09/01/2016	MBS PAYMENT		7,128	7,128	6,988	7,117		11		11		7,128			0	144	07/01/2043	1
3138X1 3A 2	FN AU2592		09/01/2016	MBS PAYMENT		10,810	10,810	11,198	10,845		(35)		(35)		10,810			0	260	08/01/2043	1
3138X3 XM 9	FN AU4283		09/01/2016	MBS PAYMENT		10,035	10,035	10,069	10,038		(3)		(3)		10,035			0	238	09/01/2043	1
3138Y6 3S 1	FN AX5308		09/01/2016	MBS PAYMENT		22,465	22,465	23,578	22,582		(117)		(117)		22,465			0	538	01/01/2042	1
3138YH U6 5	FN AY4204		09/01/2016	MBS PAYMENT		6,732	6,732	6,953	6,750		(18)		(18)		6,732			0	160	05/01/2045	1
31394V LV 0	FNR 2005-123 PG		09/01/2016	MBS PAYMENT		55,786	55,786	54,117	55,539		247		247		55,786			0	2,012	01/25/2036	1
31400Y 3Q 7	FN 702007		09/01/2016	MBS PAYMENT		1,824	1,824	1,867	1,826		(2)		(2)		1,824			0	55	05/01/2033	1
31404V 4L 9	FN 780327		09/01/2016	MBS PAYMENT		13,478	13,478	13,579	13,498		(19)		(19)		13,478			0	447	07/01/2019	1
31404W UE 4	FN 780981		09/01/2016	MBS PAYMENT		6,458	6,458	6,447	6,455		3		3		6,458			0	192	06/01/2019	1
31406U HH 4	FN 820232		09/01/2016	MBS PAYMENT		695	695	705	696		(1)		(1)		695			0	25	06/01/2035	1
31407B BK 4	FN 825442		09/01/2016	MBS PAYMENT		316	316	319	316						316			0	12	05/01/2035	1
31409Y UL 9	FN 882687		09/01/2016	MBS PAYMENT		3,535	3,535	3,509	3,533		2		2		3,535			0	141	06/01/2036	1
31410U KA 9	FN 897689		09/01/2016	MBS PAYMENT		17,234	17,234	16,852	17,211		23		23		17,234			0	631	06/01/2037	1
31413R 2P 0	FN 953582		09/01/2016	MBS PAYMENT		4,215	4,215	4,446	4,215		(30)		(30)		4,215			0	163	12/01/2037	1
31416J ZM 6	FN AA1647		09/01/2016	MBS PAYMENT		13,021	13,021	13,458	13,048		(27)		(27)		13,021			0	435	02/01/2039	1
31416M 5A 8	FN AA4440		09/01/2016	MBS PAYMENT		1,119	1,119	1,159	1,124		(5)		(5)		1,119			0	37	03/01/2039	1
31417C JL 0	FN AB5666		09/01/2016	MBS PAYMENT		10,629	10,629	10,839	10,653		(24)		(24)		10,629			0	247	07/01/2042	1
31417C KM 6	FN AB5699		09/01/2016	MBS PAYMENT		10,765	10,765	10,724	10,760		4		4		10,765			0	263	07/01/2042	1
31417C VS 1	FN AB6024		09/01/2016	MBS PAYMENT		11,512	11,512	12,038			(45)		(45)		11,512			0	170	08/01/2042	1

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**Medical Malpractice Joint Underwriting Association of Rhode Island**

**SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
										11	12	13	14	15								
CUSIP Identification	Description	For re ign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Design- ation or Market Indicator (a)	
31417D TR 4	FN AB6859		09/01/2016	MBS PAYMENT		10,940	10,940	11,371			(30)		(30)		10,940			0	226	11/01/2042	1	
31417E MZ 1	FN AB7575		09/01/2016	MBS PAYMENT		5,619	5,619	5,598	5,617		1		1		5,619			0	112	01/01/2043	1	
31417E N9 8	FN AB7615		09/01/2016	MBS PAYMENT		22,777	22,777	23,802	22,842		(65)		(65)		22,777			0	552	01/01/2043	1	
31417F 3E 6	FN AB8896		09/01/2016	MBS PAYMENT		8,916	8,916	8,665	8,894		22		22		8,916			0	182	04/01/2043	1	
31417G 5A 0	FN AB9840		09/01/2016	MBS PAYMENT		16,791	16,791	17,601			(55)		(55)		16,791			0	298	07/01/2043	1	
31417H B5 2	FN AB9959		09/01/2016	MBS PAYMENT		10,209	10,209	10,651	10,247		(38)		(38)		10,209			0	260	07/01/2043	1	
31418W CY 4	FN AD8186		09/01/2016	MBS PAYMENT		8,622	8,622	8,933	8,673		(52)		(52)		8,622			0	195	09/01/2025	1	
31419E UD 9	FN AE4179		09/01/2016	MBS PAYMENT		6,971	6,971	7,217	7,023		(51)		(51)		6,971			0	163	10/01/2025	1	
31419J SV 1	FN AE7731		09/01/2016	MBS PAYMENT		13,100	13,100	13,970	13,220		(120)		(120)		13,100			0	397	11/01/2040	1	
604146 AG 5	MINNESOTA ST GEN FUND REVENUE		08/08/2016	FIRST TENNESSEE		554,245	500,000	610,280	560,516		(11,513)		(11,513)		549,003		5,242	5,242	23,611	03/01/2019	1FE	
3199999. Total Bonds - U.S. Special Revenue and Special Assessment						2,064,586	1,937,026	2,204,353	1,977,976	0	(27,242)	0	(27,242)	0	2,051,315	0	13,271	13,271	76,875		XXX	XXX
<b>Bonds - Industrial and Miscellaneous</b>																						
05568B AA 6	BURLINGTN NO SF 06-1 TR		07/15/2016	MBS PAYMENT		127	127	128	127				0		127			0	7	01/15/2024	1FE	
12489W QD 9	CBASS 2005-CB8 AF2		09/01/2016	MBS PAYMENT		10,428	10,428	10,428	10,371	57			57		10,428			0	292	12/25/2035	3AM	
126410 LM 9	CSX TRANSPORTATION INC		07/15/2016	SINK		23,460	23,460	23,460	23,460	0			0		23,460			0	1,466	01/15/2023	1FE	
438516 AS 5	HONEYWELL INTERNATIONAL		09/13/2016	MILLENNIUM ADVISORS		102,176	100,000	98,497	99,772		131		131		99,903		2,273	2,273	5,285	03/15/2017	1FE	
742741 AA 9	PROCTER & GAMBLE - ESOP		07/01/2016	SINK		39,840	39,840	39,840	39,840				0		39,840			0	3,729	01/01/2021	1FE	
828807 BW 6	SIMON PROPERTY GROUP LP		09/02/2016	CALLED BY ISSUER at 100.000		500,000	500,000	496,035	499,542		458		458		500,000			0	19,760	12/01/2016	1FE	
90261X BY 7	UBS AG STAMFORD CT	E	07/15/2016	MATURITY		700,000	700,000	719,418	701,396		(1,396)		(1,396)		700,000			0	41,125	07/15/2016	2FE	
90783X AA 9	UNION PACIFIC RR CO 07-3		07/02/2016	MBS PAYMENT		20,723	20,723	20,723	20,723				0		20,723			0	1,280	01/02/2031	1FE	
942683 AG 8	ACTAVIS INC		07/22/2016	HSBC SECURITIES LIMITED		201,212	200,000	199,082	199,668		107		107		199,776		1,436	1,436	3,083	10/01/2017	2FE	
06367T HQ 6	BANK OF MONTREAL	A	07/19/2016	MORGAN STANLEY		500,075	500,000	499,520			1		1		499,521		554	554	63	07/18/2019	1FE	
06739F GF 2	BARCLAYS BANK PLC	F	09/13/2016	J.P. MORGAN		500,420	500,000	501,484	500,178		(172)		(172)		500,005		415	415	24,444	09/22/2016	1FE	
893830 AY 5	TRANSOCEAN INC	F	07/21/2016	TENDER OFFER		283,500	300,000	329,541	204,000	117,019	(2,157)		114,862		318,862		(35,362)	(35,362)	13,325	11/15/2020	4FE	
3899999. Total Bonds - Industrial and Miscellaneous						2,881,961	2,894,578	2,938,156	2,299,077	117,076	(3,028)	0	114,048	0	2,912,645	0	(30,684)	(30,684)	113,859		XXX	XXX
8399997. Total Bonds - Part 4						4,947,722	4,832,779	5,143,683	4,278,228	117,076	(30,269)	0	86,807	0	4,965,135	0	(17,413)	(17,413)	190,788		XXX	XXX
8399999. Total Bonds						4,947,722	4,832,779	5,143,683	4,278,228	117,076	(30,269)	0	86,807	0	4,965,135	0	(17,413)	(17,413)	190,788		XXX	XXX
9999999. Total Bonds, Preferred and Common Stocks						4,947,722	XXX	5,143,683	4,278,228	117,076	(30,269)	0	86,807	0	4,965,135	0	(17,413)	(17,413)	190,788		XXX	XXX

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(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues:.....0.

**Sch. DB - Pt. A - Sn. 1**  
**NONE**

**Sch. DB - Pt. B - Sn. 1**  
**NONE**

**Sch. DB - Pt. D - Sn. 1**  
**NONE**

**Sch. DB - Pt. D - Sn. 2**  
**NONE**

**Sch. DL - Pt. 1**  
**NONE**

**Sch. DL - Pt. 2**  
**NONE**

**SCHEDULE E - PART 1 - CASH**

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
<b>Open Depositories</b>								
BANK OF AMERICA .....	PROVIDENCE, RI .....				1,361,424	1,088,841	1,393,457	XXX
0199999. Total Open Depositories .....	XXX	XXX	0	0	1,361,424	1,088,841	1,393,457	XXX
0399999. Total Cash on Deposit .....	XXX	XXX	0	0	1,361,424	1,088,841	1,393,457	XXX
0599999. Total Cash .....	XXX	XXX	0	0	1,361,424	1,088,841	1,393,457	XXX

## SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
<b>Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations</b>							
ABBOTT LABORATORIES.....		09/23/2016.....	0.650	10/03/2016.....	249,991		23
ABBOTT LABORATORIES.....		09/23/2016.....	0.650	10/11/2016.....	499,910		72
3299999. Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations.....					749,901	.0	95
3899999. Total - Industrial and Miscellaneous (Unaffiliated).....					749,901	.0	95
<b>Total Bonds</b>							
7799999. Subtotals - Issuer Obligations.....					749,901	.0	95
8399999. Subtotals - Bonds.....					749,901	.0	95
8699999. Total - Cash Equivalents.....					749,901	.0	95

QE13



**SUPPLEMENT "A" TO SCHEDULE T**

**EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN  
ALLOCATED BY STATES AND TERRITORIES**

Designate the type of health care providers reported on this page.

**Physicians - Including Surgeons and Osteopaths**

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
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	1,189,914	1,335,017	1,165,144	5	(1,975,666)	10,994,878	39	17,696,275
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. US Virgin Islands.....VI								
56. Northern Mariana Islands.....MP								
57. Canada.....CAN								
58. Aggregate Other Alien.....OT	0	0	0	0	0	0	0	0
59. Totals.....	1,189,914	1,335,017	1,165,144	5	(1,975,666)	10,994,878	39	17,696,275

**DETAILS OF WRITE-INS**

58001.....								
58002.....								
58003.....								
58998. Summary of remaining write-ins for Line 58 from overflow page.....	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ 58998) (Line 58 above).....	0	0	0	0	0	0	0	0



**SUPPLEMENT "A" TO SCHEDULE T**

**EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN  
ALLOCATED BY STATES AND TERRITORIES**

Designate the type of health care providers reported on this page.

**Hospitals**

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
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	268,767	355,429	254,000	4	(416,194)	3,852,500	15	4,353,295
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. US Virgin Islands.....VI								
56. Northern Mariana Islands.....MP								
57. Canada.....CAN								
58. Aggregate Other Alien.....OT	0	0	0	0	0	0	0	0
59. Totals.....	268,767	355,429	254,000	4	(416,194)	3,852,500	15	4,353,295

**DETAILS OF WRITE-INS**

58001.....								
58002.....								
58003.....								
58998. Summary of remaining write-ins for Line 58 from overflow page.....	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ 58998) (Line 58 above).....	0	0	0	0	0	0	0	0

**Supp. A to Sch. T - OP  
NONE**

**Supp. A to Sch. T - OF  
NONE**

**Overflow Page  
NONE**