



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF MARCH 31, 2025

OF THE CONDITION AND AFFAIRS OF THE

Medical Malpractice Joint Underwriting Association of Rhode Island

NAIC Group Code _____ (Current) (Prior) NAIC Company Code 13101 Employer's ID Number 5 10140354

Organized under the Laws of Rhode Island State of Domicile or Port of Entry RI

Country of Domicile United States of America

Incorporated/Organized 06/16/1975 Commenced Business 07/01/1975

Statutory Home Office One Turks Head Place Providence, RI, US 02903
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office One Turks Head Place Providence, RI, US 02903
(Street and Number) (City or Town, State, Country and Zip Code)
410-980-1100 (Area Code) (Telephone Number)

Mail Address One Turks Head Place Providence, RI, US 02903
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records One Turks Head Place Providence, RI, US 02903
(Street and Number) (City or Town, State, Country and Zip Code)
410-980-1100 (Area Code) (Telephone Number)

Internet Website Address http://rhodeislandjua.com/

Statutory Statement Contact Susan Mertes 410-980-1100
(Name) (Area Code) (Telephone Number)
susan.mertes@bbrown.com 401-369-8241
(E-mail Address) (FAX Number)

OFFICERS

Vice Chair Don Baldini Assistant Secretary Susan Mertes
Chair Earl Cottam Jr. Secretary Adam Robitaille

OTHER

DIRECTORS OR TRUSTEES

<u>Adam Robitaille</u>	<u>Don Baldini</u>	<u>Earl Cottam Jr.</u>
<u>Stacy Paterno</u>	<u>Jennifer Morrison</u>	<u>Barbara M Cavicchio DDS</u>
<u>Eric Payntor</u>	<u>Michael Walder</u>	<u>Virginia Burke</u>
		<u>Joe Torti</u>

State of Rhode Island SS:
County of Kent

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.

Susan Mertes
Assistant Secretary

Earl Cottam Jr.
Chair

Adam Robitaille
Secretary

Subscribed and sworn to before me this 28 day of April
Stephanie Williamson

- 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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QUARTERLY STATEMENT

AS OF MARCH 31, 2025

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Medical Malpractice Joint Underwriting Association of Rhode Island

NAIC Group Code _____ (Current) (Prior) NAIC Company Code 13101 Employer's ID Number 51-0140354

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Country of Domicile United States of America

Incorporated/Organized 06/16/1975 Commenced Business 07/01/1975

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Chair Earl Cottam Jr. Secretary Adam Robitaille

OTHER

DIRECTORS OR TRUSTEES

Adam Robitaille James Pascalides DPM Earl Cottam Jr.
Stacy Paterno Don Baldini Barbara M Cavicchio DDS
Eric Paynter Jennifer Morrison Virginia Burke
Michael Walder Joe Torti

State of Rhode Island SS:
County of Providence

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Susan Mertes Assistant Secretary
Earl Cottam Jr. Chair
Adam Robitaille Secretary

Subscribed and sworn to before me this 12th day of May 2025

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

AMY M HILLIARD
Notary Public-Maryland
Anne Arundel County
My Commission Expires
February 27, 2027

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

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	87,986,309		87,986,309	88,269,482
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$ 446,247), cash equivalents (\$ 1,338,024) and short-term investments (\$)	1,784,270		1,784,270	1,238,510
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives			0	0
8. Other invested assets	84,862,515		84,862,515	84,995,497
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	174,633,094	0	174,633,094	174,503,489
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	1,111,925		1,111,925	1,172,043
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	(193,318)		(193,318)	(114,571)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	307,196		307,196	229,899
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	230,429		230,429	192,190
18.2 Net deferred tax asset			0	0
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets (\$)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates			0	0
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other than invested assets	6,033	0	6,033	17,210
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	176,095,359	0	176,095,359	176,000,260
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	176,095,359	0	176,095,359	176,000,260
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Miscellaneous Accounts Receivable	1,182		1,182	2,359
2502. Prepaid Losses			0	0
2503. Prepaid premium tax	4,851		4,851	14,851
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	6,033	0	6,033	17,210

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ 799,614)	17,169,046	17,033,224
2. Reinsurance payable on paid losses and loss adjustment expenses		0
3. Loss adjustment expenses	7,387,492	6,901,082
4. Commissions payable, contingent commissions and other similar charges	3,703	29
5. Other expenses (excluding taxes, licenses and fees)	177,788	185,979
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))		
7.2 Net deferred tax liability	1,477,264	1,626,563
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)	2,478,768	2,229,139
10. Advance premium	705,089	732,774
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)		0
13. Funds held by company under reinsurance treaties		0
14. Amounts withheld or retained by company for account of others	462,059	462,057
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified)		0
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Derivatives	0	0
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities	1,938	6,903
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	29,863,147	29,177,750
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	29,863,147	29,177,750
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)	146,232,212	146,822,510
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36)	146,232,212	146,822,510
38. Totals (Page 2, Line 28, Col. 3)	176,095,359	176,000,260
DETAILS OF WRITE-INS		
2501. Unearned Finance Charge		0
2502. Premium Deficiency Reserve		0
2503. Losses Payable	1,938	6,903
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	1,938	6,903
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0
2999. Totals (Lines 2901 through 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 through 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
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$770,598)	520,969	710,558	2,520,476
1.2 Assumed (written \$)			
1.3 Ceded (written \$)			
1.4 Net (written \$770,598)	520,969	710,558	2,520,476
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 799,614):			
2.1 Direct	1,013,643	1,789,132	3,903,170
2.2 Assumed			
2.3 Ceded			
2.4 Net	1,013,643	1,789,132	3,903,170
3. Loss adjustment expenses incurred	599,081	637,171	930,373
4. Other underwriting expenses incurred	366,591	387,124	1,511,464
5. Aggregate write-ins for underwriting deductions	0	0	0
6. Total underwriting deductions (Lines 2 through 5)	1,979,315	2,813,427	6,345,007
7. Net income of protected cells			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	(1,458,346)	(2,102,869)	(3,824,531)
INVESTMENT INCOME			
9. Net investment income earned	1,502,779	1,388,105	5,846,295
10. Net realized capital gains (losses) less capital gains tax of \$ 497	(1,871)	405,768	(16,589)
11. Net investment gain (loss) (Lines 9 + 10)	1,500,908	1,793,873	5,829,706
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$)	0	0	0
13. Finance and service charges not included in premiums	3,980	9,608	36,062
14. Aggregate write-ins for miscellaneous income	0	0	(592,220)
15. Total other income (Lines 12 through 14)	3,980	9,608	(556,158)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	46,542	(299,388)	1,449,017
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)	46,542	(299,388)	1,449,017
19. Federal and foreign income taxes incurred	(37,742)	(154,927)	188,515
20. Net income (Line 18 minus Line 19)(to Line 22)	84,284	(144,461)	1,260,502
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	146,822,512	142,907,661	142,907,661
22. Net income (from Line 20)	84,284	(144,461)	1,260,502
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$ (173,015)	(650,868)	1,109,696	2,655,004
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax	(23,716)	11,315	(655)
27. Change in nonadmitted assets			0
28. Change in provision for reinsurance			0
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	0	0	0
33.2 Transferred to capital (Stock Dividend)			
33.3 Transferred from capital			
34. Net remittances from or (to) Home Office			
35. Dividends to stockholders			0
36. Change in treasury stock			0
37. Aggregate write-ins for gains and losses in surplus	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37)	(590,300)	976,550	3,914,851
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	146,232,212	143,884,211	146,822,512
DETAILS OF WRITE-INS			
0501. Change in Premium Deficiency Reserve		0	0
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0	0
1401. Gain or loss on retroactive reinsurance		0	(592,220)
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	(592,220)
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0	0
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	0	0	0

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	744,363	817,437	2,866,436
2. Net investment income	1,527,574	1,373,832	5,707,985
3. Miscellaneous income	15,158	(6,292)	(632,882)
4. Total (Lines 1 to 3)	2,287,095	2,184,977	7,941,539
5. Benefit and loss related payments	877,821	302,327	4,652,301
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	488,743	713,318	2,265,045
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	0	300,000	499,595
10. Total (Lines 5 through 9)	1,366,564	1,315,645	7,416,941
11. Net cash from operations (Line 4 minus Line 10)	920,531	869,332	524,598
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	3,744,155	2,204,590	14,663,808
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	0	500,000	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	3,744,155	2,704,590	14,663,808
13. Cost of investments acquired (long-term only):			
13.1 Bonds	4,125,140	3,649,920	15,010,770
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	4,125,140	3,649,920	15,010,770
14. Net increase/(decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(380,985)	(945,330)	(346,962)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0	0
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied)	6,214	0	0
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	6,214	0	0
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	545,760	(75,998)	177,636
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	1,238,510	1,060,874	1,060,874
19.2 End of period (Line 18 plus Line 19.1)	1,784,270	984,876	1,238,510

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

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NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices
Company input

	SSAP #	F/S Page	F/S Line #		2025		2024
NET INCOME							
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$	84,284	\$	1,260,502
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:							
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:							
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$	84,284	\$	1,260,502
SURPLUS							
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$	146,232,212	\$	146,822,510
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:							
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:							
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$	146,232,212	\$	146,822,510

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

C. Accounting Policy
Company input

D. Going Concern
Company input

NOTE 2 Accounting Changes and Corrections of Errors
Company input

NOTE 3 Business Combinations and Goodwill

A. Statutory Purchase Method

The transaction was accounted for as a statutory purchase, and reflects the following:

1	2	3	4	5
Purchased Entity	Acquisition Date	Cost of Acquired Entity	Original Amount of Goodwill	Original Amount of Admitted Goodwill
Total	XXX	\$ -	\$ -	\$ -

1	6	7	8	9
Purchased Entity	Admitted Goodwill as of the Reporting Date	Amount of Goodwill Amortized During the Reporting Period	Book Value of SCA	Admitted Goodwill as a % of SCA BACV, Gross of Admitted Goodwill Col. 6/Col. 8
Total	\$ -	\$ -	\$ -	XXX

B. Statutory Merger
Company input

C. Impairment Loss
Company input

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

(1) Capital & Surplus	
Less:	
(2) Admitted Positive Goodwill	
(3) Admitted EDP Equipment & Operating System Software	
(4) Admitted Net Deferred Taxes	
(5) Adjusted Capital and Surplus (Line 1-2-3-4)	
(6) Limitation on amount of goodwill (adjusted capital and surplus times 10% goodwill limitation [Line 5*10%])	
(7) Current period reported Admitted Goodwill	
(8) Current Period Admitted Goodwill as a % of prior period Adjusted Capital and Surplus (Line 7/Line 5)	

Calculation of Limitation Using Prior Quarter Numbers	Current Reporting Period
	XXX
	XXX
	XXX
	XXX
\$ -	XXX
\$ -	XXX
XXX	
XXX	0.0%

NOTE 4 Discontinued Operations

NOTES TO FINANCIAL STATEMENTS

A. Discontinued Operation Disposed of or Classified as Held for Sale

(1) List of Discontinued Operations Disposed of or Classified as Held for Sale

Discontinued Operation Identifier	Description of Discontinued Operation
---	---------------------------------------

(2) Company input

(3) Loss Recognized on Discontinued Operations

Discontinued Operation Identifier	Amount for Reporting Period	Cumulative Amount Since Classified as Held for Sale
---	--------------------------------	--

(4) Carrying Amount and Fair Value of Discontinued Operations and the Effect on Assets, Liabilities, Surplus and Income

a. Carrying Amount of Discontinued Operations

Discontinued Operation Identifier	Carrying Amount Immediately Prior to Classification as Held for Sale	Current Fair Value Less Costs to Sell
---	---	---

b. Effect of Discontinued Operations on Assets, Liabilities, Surplus and Income

	Discontinued Operation Identifier	Line Number	Line Description	Amount Attributable to Discontinued Operations
1. Assets				
2. Liabilities				
3. Surplus				
4. Income				

B. Change in Plan of Sale of Discontinued Operation

Company input

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

Company input

D. Equity Interest Retained in the Discontinued Operation After Disposal

Company input

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

(1) Company input

(2) Company input

(3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total

<u>Current Year</u>	<u>Prior Year</u>
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(4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in Which the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. Recorded Investment (All)							
(a) Current							\$ -
(b) 30 - 59 Days Past Due							\$ -
(c) 60 - 89 Days Past Due							\$ -
(d) 90 - 179 Days Past Due							\$ -
(e) 180+ Days Past Due							\$ -
2. Accruing Interest 90 - 179 Days Past Due							
(a) Recorded Investment							\$ -
(b) Interest Accrued							\$ -
3. Accruing Interest 180+ Days Past Due							
(a) Recorded Investment							\$ -
(b) Interest Accrued							\$ -
4. Interest Reduced							
(a) Recorded Investment							\$ -
(b) Number of Loans							\$ -
(c) Percent Reduced							

NOTES TO FINANCIAL STATEMENTS

5. Participant or Co-lender in a Mortgage Loan Agreement								
(a) Recorded Investment							\$	-
b. Prior Year								
1. Recorded Investment (All)								
(a) Current							\$	-
(b) 30 - 59 Days Past Due							\$	-
(c) 60 - 89 Days Past Due							\$	-
(d) 90 - 179 Days Past Due							\$	-
(e) 180+ Days Past Due							\$	-
2. Accruing Interest 90 - 179 Days Past Due								
(a) Recorded Investment							\$	-
(b) Interest Accrued							\$	-
3. Accruing Interest 180+ Days Past Due								
(a) Recorded Investment							\$	-
(b) Interest Accrued							\$	-
4. Interest Reduced								
(a) Recorded Investment							\$	-
(b) Number of Loans							\$	-
(c) Percent Reduced							\$	-
5. Participant or Co-lender in a Mortgage Loan Agreement								
(a) Recorded Investment							\$	-

(5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-lender Mortgage Loan Agreement for Which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan Agreement:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. With Allowance for Credit Losses							\$ -
2. No Allowance for Credit Losses							\$ -
3. Total (1 + 2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan							\$ -
b. Prior Year							
1. With Allowance for Credit Losses							\$ -
2. No Allowance for Credit Losses							\$ -
3. Total (1 + 2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan							\$ -

(6) Investment in Impaired Loans – Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. Average Recorded Investment							\$ -
2. Interest Income Recognized							\$ -
3. Recorded Investments on Nonaccrual Status							\$ -
4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting							\$ -
b. Prior Year							
1. Average Recorded Investment							\$ -
2. Interest Income Recognized							\$ -
3. Recorded Investments on Nonaccrual Status							\$ -
4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting							\$ -

(7) Allowance for credit losses:

	<u>Current Year</u>	<u>Prior Year</u>
a) Balance at beginning of period		
b) Additions charged to operations		
c) Direct write-downs charged against the allowances		
d) Recoveries of amounts previously charged off		
e) Balance at end of period (a+b-c-d)	\$ -	\$ -

(8) Mortgage Loans Derecognized as a Result of Foreclosure:

	<u>Current Year</u>
a) Aggregate amount of mortgage loans derecognized	
b) Real estate collateral recognized	
c) Other collateral recognized	
d) Receivables recognized from a government guarantee of the foreclosed mortgage loan	

(9) Company input

B. Debt Restructuring

	<u>Current Year</u>	<u>Prior Year</u>
(1) The total recorded investment in restructured loans, as of year end		
(2) The realized capital losses related to these loans		
(3) Total contractual commitments to extend credit to debtors owning receivables whose terms have been modified in troubled debt restructurings		

NOTES TO FINANCIAL STATEMENTS

(4) Company input

C. Reverse Mortgages

- (1) Company input
- (2) Company input
- (3) Reverse Mortgages: Enter the reserve amount that is netted against the asset
- (4) Reverse Mortgages: Investment income or (loss) recognized in the period as a result of the re-estimated cash flows

D. Asset-Backed Securities

(1) Company input

(2) OTTI recognized 1st Quarter

- a. Intent to sell
- b. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

c. Total 1st Quarter (a+b)

OTTI recognized 2nd Quarter

d. Intent to sell

- e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

f. Total 2nd Quarter (d+e)

OTTI recognized 3rd Quarter

g. Intent to sell

- h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

i. Total 3rd Quarter (g+h)

OTTI recognized 4th Quarter

j. Intent to sell

- k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

l. Total 4th Quarter (j+k)

m. Annual Aggregate Total (c+f+i+l)

1 Amortized Cost Basis Before Other-than-Temporary Impairment	2 Other-than-Temporary Impairment Recognized in Loss	3 Fair Value 1 - 2
		\$ -
		\$ -
\$ -	\$ -	\$ -
		\$ -
		\$ -
\$ -	\$ -	\$ -
		\$ -
		\$ -
\$ -	\$ -	\$ -
		\$ -
\$ -	\$ -	\$ -
		\$ -
	\$ -	\$ -

(3)

1 CUSIP	2 Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI	3 Present Value of Projected Cash Flows	4 Recognized Other-Than-Temporary Impairment	5 Amortized Cost After Other-Than-Temporary Impairment	6 Fair Value at time of OTTI	7 Date of Financial Statement Where Reported
Total	XXX	XXX	\$ -	XXX	XXX	XXX

(4)

- a) The aggregate amount of unrealized losses:
 - 1. Less than 12 Months
 - 2. 12 Months or Longer
- b) The aggregate related fair value of securities with unrealized losses:
 - 1. Less than 12 Months
 - 2. 12 Months or Longer

(5) Company input

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) Company input
- (2) Company input
- (3) Collateral Received
 - a. Aggregate Amount Collateral Received

1. Securities Lending

- (a) Open
- (b) 30 Days or Less
- (c) 31 to 60 Days
- (d) 61 to 90 Days
- (e) Greater Than 90 Days
- (f) Subtotal (a+b+c+d+e)
- (g) Securities Received
- (h) Total Collateral Received (f+g)

2. Dollar Repurchase Agreement

- (a) Open
- (b) 30 Days or Less
- (c) 31 to 60 Days
- (d) 61 to 90 Days
- (e) Greater Than 90 Days
- (f) Subtotal (a+b+c+d+e)
- (g) Securities Received
- (h) Total Collateral Received (f+g)

b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged

c. Company input

Fair Value

	\$ -
	\$ -
	\$ -
	\$ -

NOTES TO FINANCIAL STATEMENTS

(4) Company input

(5) Collateral Reinvestment

a. Aggregate Amount Collateral Reinvested

	Amortized Cost		Fair Value	
1. Securities Lending				
(a) Open				
(b) 30 Days or Less				
(c) 31 to 60 Days				
(d) 61 to 90 Days				
(e) 91 to 120 Days				
(f) 121 to 180 Days				
(g) 181 to 365 Days				
(h) 1 to 2 years				
(i) 2 to 3 years				
(j) Greater than 3 years				
(k) Subtotal (Sum of a through j)	\$	-	\$	-
(l) Securities Received				
(m) Total Collateral Reinvested (k+l)	\$	-	\$	-
2. Dollar Repurchase Agreement				
(a) Open				
(b) 30 Days or Less				
(c) 31 to 60 Days				
(d) 61 to 90 Days				
(e) 91 to 120 Days				
(f) 121 to 180 Days				
(g) 181 to 365 Days				
(h) 1 to 2 years				
(i) 2 to 3 years				
(j) Greater than 3 years				
(k) Subtotal (Sum of a through j)	\$	-	\$	-
(l) Securities Received				
(m) Total Collateral Reinvested (k+l)	\$	-	\$	-

b. Company input

(6) Company input

(7) Collateral for securities lending transactions that extend beyond one year from the reporting date.

Description of Collateral	Amount
Total Collateral Extending beyond one year of the reporting date	\$ -

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) Company input

REPURCHASE TRANSACTION – CASH TAKER – OVERVIEW OF SECURED BORROWING TRANSACTIONS

(2) Type of Repo Trades Used

- a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(3) Original (Flow) & Residual Maturity

- a. Maximum Amount
 - 1. Open – No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year
- b. Ending Balance
 - 1. Open – No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(4) Company input

(5) Securities "Sold" Under Repo – Secured Borrowing

- a. Maximum Amount
 - 1. BACV
 - 2. Nonadmitted - Subset of BACV
 - 3. Fair Value
- b. Ending Balance
 - 1. BACV
 - 2. Nonadmitted - Subset of BACV
 - 3. Fair Value

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
XXX	XXX	XXX	
XXX	XXX	XXX	
XXX	XXX	XXX	

NOTES TO FINANCIAL STATEMENTS

(6) Securities Sold Under Repo – Secured Borrowing by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. ICO - BACV				
b. ICO - FV				
c. ABS - BACV				
d. ABS - FV				
e. Preferred Stock - BACV				
f. Preferred Stock - FV				
g. Common Stock				
h. Mortgage Loans - BACV				
i. Mortgage Loans - FV				
j. Real Estate - BACV				
k. Real Estate - FV				
l. Derivatives - BACV				
m. Derivatives - FV				
n. Other Invested Assets - BACV				
o. Other Invested Assets - FV				
p. Total Assets - BACV	\$ -	\$ -	\$ -	\$ -
q. Total Assets - FV	\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NON- ADMITTED
a. ICO - BACV				
b. ICO - FV				
c. ABS - BACV				
d. ABS - FV				
e. Preferred Stock - BACV				
f. Preferred Stock - FV				
g. Common Stock				
h. Mortgage Loans - BACV				
i. Mortgage Loans - FV				
j. Real Estate - BACV				
k. Real Estate - FV				
l. Derivatives - BACV				
m. Derivatives - FV				
n. Other Invested Assets - BACV				
o. Other Invested Assets - FV				
p. Total Assets - BACV	\$ -	\$ -	\$ -	\$ -
q. Total Assets - FV	\$ -	\$ -	\$ -	\$ -

(7) Collateral Received – Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash				
2. Securities (FV)				
b. Ending Balance				
1. Cash				
2. Securities (FV)				

(8) Cash & Non-Cash Collateral Received – Secured Borrowing by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. Cash				
b. ICO - FV				
c. ABS - FV				
d. Preferred Stock - FV				
e. Common Stock				
f. Mortgage Loans - FV				
g. Real Estate - FV				
h. Derivatives - FV				
i. Other Invested Assets - FV				
j. Total Collateral Assets - FV (Sum of a through i)	\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 DOES NOT QUALIFY AS ADMITTED
a. Cash				
b. ICO - FV				
c. ABS - FV				
d. Preferred Stock - FV				
e. Common Stock				
f. Mortgage Loans - FV				
g. Real Estate - FV				
h. Derivatives - FV				
i. Other Invested Assets - FV				
j. Total Collateral Assets - FV (Sum of a through i)	\$ -	\$ -	\$ -	\$ -

(9) Allocation of Aggregate Collateral by Remaining Contractual Maturity

	FAIR VALUE
a. Overnight and Continuous	

NOTES TO FINANCIAL STATEMENTS

- b. 30 Days or Less
- c. 31 to 90 Days
- d. > 90 Days

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(10) Allocation of Aggregate Collateral Reinvested by Remaining Contractual Maturity

- a. 30 Days or Less
- b. 31 to 60 Days
- c. 61 to 90 Days
- d. 91 to 120 Days
- e. 121 to 180 Days
- f. 181 to 365 Days
- g. 1 to 2 years
- h. 2 to 3 years
- i. > than 3 years

AMORTIZED COST	FAIR VALUE

(11) Liability to Return Collateral – Secured Borrowing (Total)

- a. Maximum Amount
 - 1. Cash (Collateral – All)
 - 2. Securities Collateral (FV)
- b. Ending Balance
 - 1. Cash (Collateral – All)
 - 2. Securities Collateral (FV)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
(1) Company input

REPURCHASE TRANSACTION – CASH PROVIDER – OVERVIEW OF SECURED BORROWING TRANSACTIONS

(2) Type of Repo Trades Used

- a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(3) Original (Flow) & Residual Maturity

- a. Maximum Amount
 - 1. Open – No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year
- b. Ending Balance
 - 1. Open – No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(4) Company input

(5) Fair Value of Securities Acquired Under Repo – Secured Borrowing

- a. Maximum Amount
- b. Ending Balance

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(6) Securities Acquired Under Repo – Secured Borrowing by NAIC Designation

ENDING BALANCE

- a. ICO - FV
- b. ABS - FV
- c. Preferred Stock - FV
- d. Common Stock
- e. Mortgage Loans - FV
- f. Real Estate - FV
- g. Derivatives - FV
- h. Other Invested Assets - FV
- i. Total Assets - FV (Sum of a through h)

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

- a. ICO - FV

5 NAIC 4	6 NAIC 5	7 NAIC 6	8 DOES NOT QUALIFY AS ADMITTED

NOTES TO FINANCIAL STATEMENTS

- b. ABS - FV
- c. Preferred Stock - FV
- d. Common Stock
- e. Mortgage Loans - FV
- f. Real Estate - FV
- g. Derivatives - FV
- h. Other Invested Assets - FV
- i. Total Assets - FV (Sum of a through h)

\$	-	\$	-
\$	-	\$	-
\$	-	\$	-

(7) Collateral Provided – Secured Borrowing

- a. Maximum Amount
 - 1. Cash
 - 2. Securities (FV)
 - 3. Securities (BACV)
 - 4. Nonadmitted Subset (BACV)
- b. Ending Balance
 - 1. Cash
 - 2. Securities (FV)
 - 3. Securities (BACV)
 - 4. Nonadmitted Subset (BACV)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
	XXX	XXX	XXX	XXX
	XXX	XXX	XXX	XXX

(8) Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity

- a. Overnight and Continuous
- b. 30 Days or Less
- c. 31 to 90 Days
- d. > 90 Days

AMORTIZED COST	FAIR VALUE

(9) Recognized Receivable for Return of Collateral – Secured Borrowing

- a. Maximum Amount
 - 1. Cash
 - 2. Securities (FV)
- b. Ending Balance
 - 1. Cash
 - 2. Securities (FV)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(10) Recognized Liability to Return Collateral – Secured Borrowing (Total)

- a. Maximum Amount
 - 1. Repo Securities Sold/Acquired with Cash Collateral
 - 2. Repo Securities Sold/Acquired with Securities Collateral (FV)
- b. Ending Balance
 - 1. Repo Securities Sold/Acquired with Cash Collateral
 - 2. Repo Securities Sold/Acquired with Securities Collateral (FV)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

H. Repurchase Agreements Transactions Accounted for as a Sale
(1) Company input

REPURCHASE TRANSACTION – CASH TAKER – OVERVIEW OF SALE TRANSACTIONS

(2) Type of Repo Trades Used

- a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(3) Original (Flow) & Residual Maturity

- a. Maximum Amount
 - 1. Open – No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year
- b. Ending Balance
 - 1. Open – No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(4) Company input

(5) Securities "Sold" Under Repo – Sale

NOTES TO FINANCIAL STATEMENTS

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. BACV	XXX	XXX	XXX	
2. Nonadmitted - Subset of BACV	XXX	XXX	XXX	
3. Fair Value				
b. Ending Balance				
1. BACV	XXX	XXX	XXX	
2. Nonadmitted - Subset of BACV	XXX	XXX	XXX	
3. Fair Value				

(6) Securities Sold Under Repo – Sale by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. ICO - BACV				
b. ICO - FV				
c. ABS - BACV				
d. ABS - FV				
e. Preferred Stock - BACV				
f. Preferred Stock - FV				
g. Common Stock				
h. Mortgage Loans - BACV				
i. Mortgage Loans - FV				
j. Real Estate - BACV				
k. Real Estate - FV				
l. Derivatives - BACV				
m. Derivatives - FV				
n. Other Invested Assets - BACV				
o. Other Invested Assets - FV				
p. Total Assets - BACV	\$ -	\$ -	\$ -	\$ -
q. Total Assets - FV	\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NON- ADMITTED
a. ICO - BACV				
b. ICO - FV				
c. ABS - BACV				
d. ABS - FV				
e. Preferred Stock - BACV				
f. Preferred Stock - FV				
g. Common Stock				
h. Mortgage Loans - BACV				
i. Mortgage Loans - FV				
j. Real Estate - BACV				
k. Real Estate - FV				
l. Derivatives - BACV				
m. Derivatives - FV				
n. Other Invested Assets - BACV				
o. Other Invested Assets - FV				
p. Total Assets - BACV	\$ -	\$ -	\$ -	\$ -
q. Total Assets - FV	\$ -	\$ -	\$ -	\$ -

(7) Proceeds Received – Sale

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash				
2. Securities (FV)				
3. Nonadmitted				
b. Ending Balance				
1. Cash				
2. Securities (FV)				
3. Nonadmitted				

(8) Cash & Non-Cash Collateral Received – Sale by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. ICO - FV				
b. ABS - FV				
c. Preferred Stock - FV				
d. Common Stock				
e. Mortgage Loans - FV				
f. Real Estate - FV				
g. Derivatives - FV				
h. Other Invested Assets - FV				
i. Total Collateral Assets - FV (Sum of a through h)	\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NON- ADMITTED
a. ICO - FV				
b. ABS - FV				
c. Preferred Stock - FV				

NOTES TO FINANCIAL STATEMENTS

- d. Common Stock
- e. Mortgage Loans - FV
- f. Real Estate - FV
- g. Derivatives - FV
- h. Other Invested Assets - FV
- i. Total Collateral Assets - FV (Sum of a through h)

\$	-	\$	-
\$	-	\$	-
\$	-	\$	-

(9) Recognized Forward Resale Commitment

- a. Maximum Amount
- b. Ending Balance

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
(1) Company input

REPURCHASE TRANSACTION – CASH PROVIDER – OVERVIEW OF SALE TRANSACTIONS

(2) Type of Repo Trades Used

- a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(3) Original (Flow) & Residual Maturity

- a. Maximum Amount
 - 1. Open – No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year
- b. Ending Balance
 - 1. Open – No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(4) Company input

(5) Securities Acquired Under Repo – Sale

- a. Maximum Amount
 - 1. BACV
 - 2. Nonadmitted - Subset of BACV
 - 3. Fair Value
- b. Ending Balance
 - 1. BACV
 - 2. Nonadmitted - Subset of BACV
 - 3. Fair Value

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
XXX	XXX	XXX	XXX
XXX	XXX	XXX	XXX

(6) Securities Acquired Under Repo – Sale by NAIC Designation

ENDING BALANCE

- a. ICO - BACV
- b. ICO - FV
- c. ABS - BACV
- d. ABS - FV
- e. Preferred Stock - BACV
- f. Preferred Stock - FV
- g. Common Stock
- h. Mortgage Loans - BACV
- i. Mortgage Loans - FV
- j. Real Estate - BACV
- k. Real Estate - FV
- l. Derivatives - BACV
- m. Derivatives - FV
- n. Other Invested Assets - BACV
- o. Other Invested Assets - FV
- p. Total Assets - BACV
- q. Total Assets - FV

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
\$	-	\$	-
\$	-	\$	-

ENDING BALANCE

- a. ICO - BACV
- b. ICO - FV
- c. ABS - BACV
- d. ABS - FV
- e. Preferred Stock - BACV

5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NON-ADMITTED

NOTES TO FINANCIAL STATEMENTS

f. Preferred Stock - FV				
g. Common Stock				
h. Mortgage Loans - BACV				
i. Mortgage Loans - FV				
j. Real Estate - BACV				
k. Real Estate - FV				
l. Derivatives - BACV				
m. Derivatives - FV				
n. Other Invested Assets - BACV				
o. Other Invested Assets - FV				
p. Total Assets - BACV	\$ -	\$ -	\$ -	\$ -
q. Total Assets - FV	\$ -	\$ -	\$ -	\$ -

(7) Proceeds Provided - Sale

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash				
2. Securities (FV)				
3. Securities (BACV)	XXX	XXX	XXX	XXX
4. Nonadmitted Subset (BACV)	XXX	XXX	XXX	XXX
b. Ending Balance				
1. Cash				
2. Securities (FV)				
3. Securities (BACV)				
4. Nonadmitted Subset (BACV)				

(8) Recognized Forward Resale Commitment

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
b. Ending Balance				

J. Real Estate

- (1) Company input
- (2) Company input
- (3) Company input
- (4) Company input
- (5) Company input

K. Low Income Housing tax Credits (LIHTC)

- (1) Company input
- (2) Company input
- (3) Company input
- (4) Company input
- (5) Company input
- (6) Company input
- (7) Company input

L. Restricted Assets

1. Restricted Assets (Including Pledged)

	Gross (Admitted & Nonadmitted) Restricted						
	Current Year					6	7
	1	2	3	4	5		
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)
a. Subject to contractual obligation for which liability is not shown					\$ -		\$ -
b. Collateral held under security lending agreements					\$ -		\$ -
c. Subject to repurchase agreements					\$ -		\$ -
d. Subject to reverse repurchase agreements					\$ -		\$ -
e. Subject to dollar repurchase agreements					\$ -		\$ -
f. Subject to dollar reverse repurchase agreements					\$ -		\$ -
g. Placed under option contracts					\$ -		\$ -
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock					\$ -		\$ -
i. FHLB capital stock					\$ -		\$ -
j. On deposit with states					\$ -		\$ -
k. On deposit with other regulatory bodies					\$ -		\$ -
l. Pledged collateral to FHLB (including assets backing funding agreements)					\$ -		\$ -
m. Pledged as collateral not captured in other categories					\$ -		\$ -
n. Other restricted assets					\$ -		\$ -

NOTES TO FINANCIAL STATEMENTS

o. Total Restricted Assets (Sum of a through n)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
---	------	------	------	------	------	------	------

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

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

(c) Column 5 divided by Asset Page, Column 1, Line 28
(d) Column 9 divided by Asset Page, Column 3, Line 28

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

Description of Assets	Gross (Admitted & Nonadmitted) Restricted						8 Total Current Year Admitted Restricted	Percentage		
	Current Year					6 Total From Prior Year		7 Increase/ (Decrease) (5 minus 6)	9 Gross (Admitted & Nonadmitted) Restricted to Total Assets	10 Admitted Restricted to Total Admitted Assets
	1 Total General Account (G/A)	2 G/A Supporting Protected Cell Account Activity (a)	3 Total Protected Cell Account (S/A) Restricted Assets	4 Protected Cell Account Assets Supporting G/A Activity (b)	5 Total (1 plus 3)					
Total (c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.000%	0.000%	

(a) Subset of column 1
(b) Subset of column 3
(c) Total Line for Columns 1 through 7 should equal 5L(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)m Columns 9 through 11 respectively.

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

Description of Assets	Gross (Admitted & Nonadmitted) Restricted						8 Total Current Year Admitted Restricted	Percentage		
	Current Year					6 Total From Prior Year		7 Increase/ (Decrease) (5 minus 6)	9 Gross (Admitted & Nonadmitted) Restricted to Total Assets	10 Admitted Restricted to Total Admitted Assets
	1 Total General Account (G/A)	2 G/A Supporting Protected Cell Account Activity (a)	3 Total Protected Cell Account (S/A) Restricted Assets	4 Protected Cell Account Assets Supporting G/A Activity (b)	5 Total (1 plus 3)					
Total (c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.000%	0.000%	

(a) Subset of column 1
(b) Subset of column 3
(c) Total Line for Columns 1 through 7 should equal 5L(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)n Columns 9 through 11 respectively.

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

Collateral Assets	1 Book/Adjusted Carrying Value (BACV)	2 Fair Value	3 % of BACV to Total Assets (Admitted and Nonadmitted)*	4 % of BACV to Total Admitted Assets **
General Account:				
a. Cash, Cash Equivalents and Short-Term Investments			0.000%	0.000%
b. Schedule D, Part 1, Section 1			0.000%	0.000%
c. Schedule D, Part 1, Section 2			0.000%	0.000%
d. Schedule D, Part 2, Section 1			0.000%	0.000%
e. Schedule D, Part 2, Section 2			0.000%	0.000%
f. Schedule B			0.000%	0.000%
g. Schedule A			0.000%	0.000%
h. Schedule BA, Part 1			0.000%	0.000%
i. Schedule DL, Part 1			0.000%	0.000%
j. Other			0.000%	0.000%

NOTES TO FINANCIAL STATEMENTS

k. Total Collateral Assets (a+b+c+d+e+f+g+h+i+i)	\$ -	\$ -	0.000%	0.000%
Protected Cell:				
l. Cash, Cash Equivalents and Short-Term Investments			0.000%	0.000%
m. Schedule D, Part 1, Section 1			0.000%	0.000%
n. Schedule D, Part 1, Section 2			0.000%	0.000%
o. Schedule D, Part 2, Section 1			0.000%	0.000%
p. Schedule D, Part 2, Section 2			0.000%	0.000%
q. Schedule B			0.000%	0.000%
r. Schedule A			0.000%	0.000%
s. Schedule BA, Part 1			0.000%	0.000%
t. Schedule DL, Part 1			0.000%	0.000%
u. Other			0.000%	0.000%
v. Total Collateral Assets (l+m+n+o+p+q+r+s+t+u)	\$ -	\$ -	0.000%	0.000%

* k = Column 1 divided by Asset Page, Line 26 (Column 1)
 v = Column 1 divided by Asset Page, Line 27 (Column 1)
 **k = Column 1 divided by Asset Page, Line 26 (Column 3)
 v = Column 1 divided by Asset Page, Line 27 (Column 3)

	1 Amount	2 % of Liability to Total Liabilities *
w. Recognized Obligation to Return Collateral Asset (General Account)		0.000%
x. Recognized Obligation to Return Collateral Asset (Separate Account)		0.000%

* w = Column 1 divided by Liability Page, Line 26 (Column 1)
 x = Column 1 divided by Liability Page, Line 27 (Column 1)

M. Working Capital Finance Investments

1. Aggregate Working Capital Finance Investments (WCFI) Book/Adjusted Carrying Value by NAIC Designation:

	Gross Asset CY	Non-admitted Asset CY	Net Admitted Asset CY
a. WCFI Designation 1			\$ -
b. WCFI Designation 2			\$ -
c. WCFI Designation 3			\$ -
d. WCFI Designation 4			\$ -
e. WCFI Designation 5			\$ -
f. WCFI Designation 6			\$ -
g. Total (a+b+c+d+e+f)	\$ -	\$ -	\$ -

2. Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs

	Book/Adjusted Carrying Value
a. Up to 180 Days	
b. 181 to 365 Days	
c. Total (a+b)	\$ -

3. Company input

N. Offsetting and Netting of Assets and Liabilities

	Gross Amount Recognized	Amount Offset*	Net Amount Presented on Financial Statements
(1) Assets			

* For derivative assets and derivative liabilities, the amount offset shall agree to Schedule DB, Part D, Section 1

	Gross Amount Recognized	Amount Offset*	Net Amount Presented on Financial Statements
(2) Liabilities			

* For derivative assets and derivative liabilities, the amount offset shall agree to Schedule DB, Part D, Section 1

O. 5GI Securities

Investment	Number of 5GI Securities		Aggregate BACV		Aggregate Fair Value	
	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
(1) ICO - AC						
(2) ABS - AC						
(3) LB&SS - AC						
(4) LB&SS - FV						
(5) Preferred Stock - AC						
(6) Preferred Stock - FV						
(7) Total (1+2+3+4+5+6)	0	0	\$ -	\$ -	\$ -	\$ -

AC - Amortized Cost FV - Fair Value

P. Short Sales

(1) Unsettled Short Sale Transactions (Outstanding as of Reporting Date)

	Proceeds Received	Current Fair Value of Securities Sold Short	Unrealized Gain or (Loss)	Expected Settlement (# of Days)	Fair Value of Short Sales Exceeding (or expected to exceed) 3 Settlement Days	Fair Value of Short Sales Expected to be Settled by Secured Borrowing
a. ICO						
b. ABS						
c. Preferred Stock						
d. Common Stock						

NOTES TO FINANCIAL STATEMENTS

e. Totals (a+b+c+d)	\$ -	\$ -	\$ -	XXX	\$ -	\$ -
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(2) Settled Short Sale Transactions

	Proceeds Received	Current Fair Value of Securities Sold Short	Realized Gain or (Loss) on Transaction	Fair Value of Short Sales that Exceeded 3 Settlement Days	Fair Value of Short Sales Settled by Secured Borrowing
a. ICO					
b. ABS					
c. Preferred Stock					
d. Common Stock					
e. Totals (a+b+c+d)	\$ -	\$ -	\$ -	\$ -	\$ -

Q. Prepayment Penalty and Acceleration Fees

	General Account	Protected Cell
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1. Number of CUSIPs
2. Aggregate Amount of Investment Income

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

	Asset Type	Percent Share
(1) Cash		
(2) Cash Equivalents		
(3) Short-Term Investments		
(4) Total (Must equal 100%)		

S. Aggregate Collateral Loans by Qualifying Investment Collateral

Collateral Type	Aggregate Collateral Loan*	Admitted	Nonadmitted
(1) Cash, Cash Equivalent & ST Investments			
a. Affiliated	\$ -		
b. Unaffiliated	\$ -		
(2) Issuer Credit Obligations			
a. Affiliated	\$ -		
b. Unaffiliated	\$ -		
(3) Asset-Backed Securities			
a. Affiliated	\$ -		
b. Unaffiliated	\$ -		
(4) Preferred Stocks			
a. Affiliated	\$ -		
b. Unaffiliated	\$ -		
(5) Common Stocks			
a. Affiliated	\$ -		
b. Unaffiliated	\$ -		
(6) Real Estate			
a. Affiliated	\$ -		
b. Unaffiliated	\$ -		
(7) Mortgage Loans			
a. Affiliated	\$ -		
b. Unaffiliated	\$ -		
(8) Joint Ventures, Partnerships, LLC			
a. Affiliated	\$ -		
b. Unaffiliated	\$ -		
(9) Other Qualifying Investments			
a. Affiliated	\$ -		
b. Unaffiliated	\$ -		
(10) Collateral Does not Qualify as an Investment			
a. Affiliated	\$ -		
b. Unaffiliated	\$ -		
(11) Total	\$ -	\$ -	\$ -

* Aggregate Collateral Loan Total Line should equal Schedule BA, Part 1, Column 12, Book Adjusted Carrying Value

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

- A. Company input
- B. Company input

NOTE 7 Investment Income

- A. Company input
- B. Company input

C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

Interest Income Due and Accrued	Amount
1. Gross	\$ 1,111,925
2. Nonadmitted	
3. Admitted	\$ 1,111,925

D. The aggregate deferred interest.

Aggregate Deferred Interest	Amount
-----------------------------	--------

E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance.

Cumulative amounts of PIK interest included in the current principal balance	Amount
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NOTES TO FINANCIAL STATEMENTS

NOTE 8 Derivative Instruments

A. Derivatives under SSAP No. 86—Derivatives

- (1) Company input
- (2) Company input
- (3) Company input
- (4) Company input
- (5) Company input
- (6) Company input
- (7) Company input
- (8)
 - a.

	Fiscal Year	Derivative Premium Payments Due
1. 2025		
2. 2026		
3. 2027		
4. 2028		
5. Thereafter		
6. Total Future Settled Premiums (Sum of 1 through 5)		\$ -

b.

	Undiscounted Future Premium Commitments	Derivative Fair Value With Premium Commitments (Reported on DB)	Derivative Fair Value Excluding Impact of Future Settled Premiums
1. Prior Year			
2. Current Year			

(9)

Type of Excluded Component	Current Fair Value	Recognized Unrealized Gain (Loss)	Fair Value Reflected in BACV	Aggregate Amount Owed at Maturity	Current Year Amortization	Remaining Amortization
a. Time Value				XXX	XXX	XXX
b. Volatility Value				XXX	XXX	XXX
c. Cross Current Basis Spread			XXX	XXX	XXX	XXX
d. Forward Points			XXX			

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

(1) Company input

(2) Recognition of gains/losses and deferred assets and liabilities

a. Scheduled Amortization

Amortization Year	Deferred Assets	Deferred Liabilities
1. 2025		
2. 2026		
3. 2027		
4. 2028		
5. 2029		
6. 2030		
7. 2031		
8. 2032		
9. 2033		
10. 2034		
11. Total (Sum of 1 through 10)	\$ -	\$ -

b. Total Deferred Balance *

* Should agree to Column 19 of Schedule DB, Part E

c. Reconciliation of Amortization:

1. Prior Year Total Deferred Balance	\$	-
2. Current Year Amortization		
3. Current Year Deferred Recognition		
4. Ending Deferred Balance [1 - (2 + 3)]	\$	-

d. Open Derivative Removed from SSAP No. 108 and Captured in Scope of SSAP No. 86

1. Total Derivative Fair Value Change		
2. Change in Fair Value Reflected as a Natural Offset to VM21 Liability under SSAP No. 108		
3. Change in Fair Value Reflected as a Deferred Asset / Liability Under SSAP No. 108		
4. Other Changes		
5. Unrealized Gain / Loss Recognized for Derivative Under SSAP No. 86 [1-(sum of 2 through 4)]	\$	-

e. Open Derivative Removed from SSAP No. 86 and Captured in Scope of SSAP No. 108

1. Total Derivative Fair Value Change		
2. Unrealized Gain / Loss Recognized Prior to the Reclassification to SSAP No. 108		
3. Other Changes		
4. Fair Value Change Available for Application under SSAP No. 108 [1-(2+3)]	\$	-

(3) Hedging Strategies Identified as No Longer Highly Effective

a. Company input

NOTES TO FINANCIAL STATEMENTS

b. Details of Hedging Strategies Identified as No Longer Highly Effective

Unique Identifier	Date Domiciliary State Notified	Amortization (# of Years) 5 or Less	Recognized Deferred Assets	Recognized Deferred Liabilities

c. Amortization

Amortization Year	Recognized Deferred Assets	Recognized Deferred Liabilities	Accelerated Amortization	Original Amortization
1. 2025				
2. 2026				
3. 2027				
4. 2028				
5. 2029				

6. Total Adjusted Amortization

d. Company input

(4) Hedging Strategies Terminated

a. Company input

b. Details of Hedging Strategies Terminated

Unique Identifier	Date Domiciliary State Notified	Amortization (# of Years) 5 or Less	Recognized Deferred Assets	Recognized Deferred Liabilities

c. Amortization

Amortization Year	Recognized Deferred Assets	Recognized Deferred Liabilities	Accelerated Amortization	Original Amortization
1. 2025				
2. 2026				
3. 2027				
4. 2028				
5. 2029				

6. Total Adjusted Amortization

d. Company input

NOTE 9 Income Taxes

A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:

1.

	As of End of Current Period			12/31/2024			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Gross Deferred Tax Assets			\$ -	\$ 555,497		\$ 555,497	\$ (555,497)	\$ -	\$ (555,497)
(b) Statutory Valuation Allowance Adjustment			\$ -	\$ -		\$ -	\$ -	\$ -	\$ -
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ -	\$ -	\$ -	\$ 555,497	\$ -	\$ 555,497	\$ (555,497)	\$ -	\$ (555,497)
(d) Deferred Tax Assets Nonadmitted			\$ -	\$ -		\$ -	\$ -	\$ -	\$ -
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ -	\$ -	\$ -	\$ 555,497	\$ -	\$ 555,497	\$ (555,497)	\$ -	\$ (555,497)
(f) Deferred Tax Liabilities			\$ -	\$ 136,797	\$ 2,045,263	\$ 2,182,060	\$ (136,797)	\$ (2,045,263)	\$ (2,182,060)
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ -	\$ -	\$ -	\$ 418,700	\$ (2,045,263)	\$ (1,626,563)	\$ (418,700)	\$ 2,045,263	\$ 1,626,563

2.

	As of End of Current Period			12/31/2024			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks			\$ -	\$ 279,992		\$ 279,992	\$ (279,992)	\$ -	\$ (279,992)
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)			\$ -	\$ 88,315		\$ 88,315	\$ (88,315)	\$ -	\$ (88,315)
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.			\$ -			\$ -	\$ -	\$ -	\$ -
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX		XXX	XXX		XXX	XXX	\$ -
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.			\$ -	\$ 187,190		\$ 187,190	\$ (187,190)	\$ -	\$ (187,190)
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ -	\$ -	\$ -	\$ 555,497	\$ -	\$ 555,497	\$ (555,497)	\$ -	\$ (555,497)

3.

NOTES TO FINANCIAL STATEMENTS

2025 2024

- a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount. 1107.000%
- b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above. \$ 146,822,510

4.

	As of End of Current Period		12/31/2024		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col. 1 - 3) Ordinary	(6) (Col. 2 - 4) Capital
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)						
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies			0.000%	0.000%	0.000%	0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)						
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies			0.000%	0.000%	0.000%	0.000%

b. Do the Company's tax-planning strategies include the use of reinsurance?

B. Company input

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

	(1) As of End of Current Period	(2) 12/31/2024	(3) (Col. 1 - 2) Change
1. Current Income Tax			
(a) Federal		\$ 212,220	\$ (212,220)
(b) Foreign		\$ -	\$ -
(c) Subtotal (1a+1b)	\$ -	\$ 212,220	\$ (212,220)
(d) Federal income tax on net capital gains		\$ (4,410)	\$ 4,410
(e) Utilization of capital loss carry-forwards			\$ -
(f) Other		\$ (23,705)	\$ 23,705
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ -	\$ 184,105	\$ (184,105)
2. Deferred Tax Assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses		\$ 431,096	\$ (431,096)
(2) Unearned premium reserve		\$ 124,401	\$ (124,401)
(3) Policyholder reserves			\$ -
(4) Investments			\$ -
(5) Deferred acquisition costs			\$ -
(6) Policyholder dividends accrual			\$ -
(7) Fixed assets			\$ -
(8) Compensation and benefits accrual			\$ -
(9) Pension accrual			\$ -
(10) Receivables - nonadmitted			\$ -
(11) Net operating loss carry-forward			\$ -
(12) Tax credit carry-forward			\$ -
(13) Other			\$ -
(99) Subtotal (sum of 2a1 through 2a13)	\$ -	\$ 555,497	\$ (555,497)
(b) Statutory valuation allowance adjustment			\$ -
(c) Nonadmitted			\$ -
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ -	\$ 555,497	\$ (555,497)
(e) Capital:			
(1) Investments			\$ -
(2) Net capital loss carry-forward			\$ -
(3) Real estate			\$ -
(4) Other			\$ -
(99) Subtotal (2e1+2e2+2e3+2e4)	\$ -	\$ -	\$ -
(f) Statutory valuation allowance adjustment			\$ -
(g) Nonadmitted			\$ -
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ -	\$ -	\$ -
(i) Admitted deferred tax assets (2d + 2h)	\$ -	\$ 555,497	\$ (555,497)
3. Deferred Tax Liabilities:			
(a) Ordinary:			
(1) Investments		\$ 136,797	\$ (136,797)
(2) Fixed assets			\$ -
(3) Deferred and uncollected premium			\$ -
(4) Policyholder reserves			\$ -
(5) Other			\$ -
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ -	\$ 136,797	\$ (136,797)
(b) Capital:			
(1) Investments		\$ 2,045,263	\$ (2,045,263)
(2) Real estate			\$ -

NOTES TO FINANCIAL STATEMENTS

(3) Other			\$ -
(99) Subtotal (3b1+3b2+3b3)	\$ -	\$ 2,045,263	\$ (2,045,263)
(c) Deferred tax liabilities (3a99 + 3b99)	\$ -	\$ 2,182,060	\$ (2,182,060)
4. Net deferred tax assets/liabilities (2i - 3c)	\$ -	\$ (1,626,563)	\$ 1,626,563

- D. Company input
- E. Company input
- F. Company input
- G. Company input
- H. Repatriation Transition Tax (RTT)
Company input
- I. Alternative Minimum Tax (AMT) Credit
Company input

	Amount
(1) Gross AMT Credit Recognized as:	
a. Current year recoverable	
b. Deferred tax asset (DTA)	
(2) Beginning Balance of AMT Credit Carryforward	
(3) Amounts Recovered	
(4) Adjustments	
(5) Ending Balance of AMT Credit Carryforward (5=2-3-4)	\$ -
(6) Reduction for Sequestration	
(7) Nonadmitted by Reporting Entity	
(8) Reporting Entity Ending Balance (8=5-6-7)	\$ -

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

- A. Company input
- B. Company input
- C. Transactions with related party who are not reported on Schedule Y

(1) Detail of Material Related Party Transactions

Ref #	Date of Transaction	Name of Related Party	Nature of Relationship	Type of Transaction	Written Agreement (Yes/No)	Due Date	Reporting Period Date Amount Due From (To)

Options for Type of Transaction:

- Loan
- Exchange of Assets or Liabilities (e.g., buys, sells and secured borrowing transactions)
- Management Services
- Cost-Sharing Agreement
- Other Transactions Involving Services
- Guarantee (e.g., guarantees to related parties, on behalf of, and when beneficiary is related party)
- Other

(2) Detail of Material Related Party Transactions Involving Services

Ref #	Name of Related Party	Overview Description	Amount Charged	Amount Based on Allocation of Costs or Market Rates	Amount Charged Modified or Waived (Yes/No)
Total			\$ -	\$ -	

(3) Detail of Material Related Party Transactions Involving Exchange of Assets and Liabilities

a. Description of Transaction

Ref #	Name of Related Party	Overview Description	Have Terms Changed from Preceding Period? (Yes/No)

b. Assets Received

Ref #	Name of Related Party	Description of Assets Received	Statement Value of Assets Received
Total			\$ -

c. Assets Transferred

NOTES TO FINANCIAL STATEMENTS

Ref #	Name of Related Party	Description of Assets Transferred	Statement Value of Assets Transferred
Total			\$ -

(4) Detail of Amounts Owed To/From a Related Party

Ref #	Name of Related Party	Aggregate Reporting Period Amount Due From	Aggregate Reporting Period (Amount Due To)	Amount Offset in Financial Statement (if qualifying)	Net Amount Recoverable/ (Payable) by Related Party	Admitted Recoverable
Total	XXX	\$ -	\$ -	\$ -	\$ -	\$ -

- D. Company input
- E. Company input
- F. Company input
- G. Company input
- H. Company input
- I. Company input
- J. Company input
- K. Company input
- L. Company input
- M. All SCA Investments

(1) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8bi Entities)

SCA Entity	Percentage of SCA Ownership	Gross Amount	Admitted Amount	Nonadmitted Amount
a. SSAP No. 97 8a Entities				
Total SSAP No. 97 8a Entities	XXX	\$ -	\$ -	\$ -
b. SSAP No. 97 8b(ii) Entities				
Total SSAP No. 97 8b(ii) Entities	XXX	\$ -	\$ -	\$ -
c. SSAP No. 97 8b(iii) Entities				
Total SSAP No. 97 8b(iii) Entities	XXX	\$ -	\$ -	\$ -
d. SSAP No. 97 8b(iv) Entities				
Total SSAP No. 97 8b(iv) Entities	XXX	\$ -	\$ -	\$ -
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d)	XXX	\$ -	\$ -	\$ -
f. Aggregate Total (a+ e)	XXX	\$ -	\$ -	\$ -

(2) NAIC Filing Response Information

SCA Entity (Should be same entities as shown in M(1) above.)	Type of NAIC Filing *	Date of Filing to the NAIC	NAIC Valuation Amount	NAIC Response Received Yes/No	NAIC Disallowed Entities Valuation Method, Resubmission Required Yes/No	Code **
a. SSAP No. 97 8a Entities						
Total SSAP No. 97 8a Entities	XXX	XXX	\$ -	XXX	XXX	XXX
b. SSAP No. 97 8b(ii) Entities						
Total SSAP No. 97 8b(ii) Entities	XXX	XXX	\$ -	XXX	XXX	XXX
c. SSAP No. 97 8b(iii) Entities						
Total SSAP No. 97 8b(iii) Entities	XXX	XXX	\$ -	XXX	XXX	XXX
d. SSAP No. 97 8b(iv) Entities						
Total SSAP No. 97 8b(iv) Entities	XXX	XXX	\$ -	XXX	XXX	XXX

NOTES TO FINANCIAL STATEMENTS

e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d)	XXX	XXX	\$ -	XXX	XXX	XXX
f. Aggregate Total (a+e)	XXX	XXX	\$ -	XXX	XXX	XXX

* S1 - Sub-1, S2 - Sub-2 or RDF - Resubmission of Disallowed Filing
 ** I - Immaterial or M - Material

N. Investment in Insurance SCAs

(1) Company input

(2) The monetary effect on net income and surplus as a result of using an accounting practice that differed from NAIC Statutory Accounting Practices and Procedures (NAIC SAP), the amount of the investment in the insurance SCA per audited statutory equity and amount of the investment if the insurance SCA had completed statutory financial statements in accordance with the AP&P Manual.

SCA Entity (Investments in Insurance SCA Entities)	Monetary Effect on NAIC SAP		Amount of Investment	
	Net Income Increase/ (Decrease)	Surplus Increase/ (Decrease)	Per Audited Statutory Equity	If the Insurance SCA Had Completed Statutory Financial Statements *

* Per AP&P Manual (without permitted or prescribed practices)

(3) Company input

O. SCA or SSAP 48 Entity Loss Tracking

1 Entity	2 Reporting Entity's Share of Net Income (Loss)	3 Accumulated Share of Net Income (Losses)	4 Reporting Entity's Share of Equity, Including Negative Equity	5 Guaranteed Obligation / Commitment for Financial Support (Yes/No)	6 Amount of the Recognized Guarantee Under SSAP No. 5

NOTE 11 Debt

A. Company input

B. FHLB (Federal Home Loan Bank) Agreements

(1) Company input

(2) FHLB Capital Stock
 a. Aggregate Totals

	1 <u>Total 2+3</u>	2 <u>General Account</u>	3 <u>Protected Cell Accounts</u>
1. Current Year			
(a) Membership Stock - Class A	\$ -		
(b) Membership Stock - Class B	\$ -		
(c) Activity Stock	\$ -		
(d) Excess Stock	\$ -		
(e) Aggregate Total (a+b+c+d)	\$ -	\$ -	\$ -
(f) Actual or estimated Borrowing Capacity as Determined by the Insurer		XXX	XXX
2. Prior Year-end			
(a) Membership Stock - Class A	\$ -		
(b) Membership Stock - Class B	\$ -		
(c) Activity Stock	\$ -		
(d) Excess Stock	\$ -		
(e) Aggregate Total (a+b+c+d)	\$ -	\$ -	\$ -
(f) Actual or estimated Borrowing Capacity as Determined by the Insurer		XXX	XXX

11B(2)a1(f) should be equal to or greater than 11B(4)a1(d)
 11B(2)a2(f) should be equal to or greater than 11B(4)a2(d)

b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption

	1	2	Eligible for Redemption			
			3	4	5	6
Current Year Total (2+3+4+5+6)	Not Eligible for Redemption	Less Than 6 Months	6 Months to Less Than 1 Year	1 to Less Than 3 Years	3 to 5 Years	
Membership Stock						
1. Class A	\$ -					
2. Class B	\$ -					

11B(2)b1 Current Year Total (Column 1) should equal 11B(2)a1(a) Total (Column 1)
 11B(2)b2 Current Year Total (Column 1) should equal 11B(2)a1(b) Total (Column 1)

(3) Collateral Pledged to FHLB

a. Amount Pledged as of Reporting Date

1 <u>Fair Value</u>	2 <u>Carrying Value</u>	3 <u>Aggregate Total Borrowing</u>

NOTES TO FINANCIAL STATEMENTS

1. Current Year Total General and Protected Cell Account Total Collateral Pledged (Lines 2+3)	\$	-	\$	-	\$	-
2. Current Year General Account Total Collateral Pledged						
3. Current Year Protected Cell Account Total Collateral Pledged						
4. Prior Year-end Total General and Protected Cell Account Total Collateral Pledged	\$	-	\$	-	\$	-

11B(3)a1 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b1 (Columns 1, 2 and 3 respectively)
 11B(3)a2 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b2 (Columns 1, 2 and 3 respectively)
 11B(3)a3 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b3 (Columns 1, 2 and 3 respectively)
 11B(3)a4 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b4 (Columns 1, 2 and 3 respectively)

b. Maximum Amount Pledged During Reporting Period

	1	2	3
	Fair Value	Carrying Value	Amount Borrowed at Time of Maximum Collateral
1. Current Year Total General and Protected Cell Account Maximum Collateral Pledged (Lines 2+3)	\$	-	\$
2. Current Year General Account Maximum Collateral Pledged			
3. Current Year Protected Cell Account Maximum Collateral Pledged			
4. Prior Year-end Total General and Protected Cell Account Maximum Collateral Pledged	\$	-	\$

(4) Borrowing from FHLB

a. Amount as of Reporting Date

	1	2	3	4
	Total 2+3	General Account	Protected Cell Account	Funding Agreements Reserves Established
1. Current Year				
(a) Debt	\$	-		XXX
(b) Funding Agreements	\$	-		
(c) Other	\$	-		XXX
(d) Aggregate Total (a+b+c)	\$	-	\$	-
2. Prior Year end				
(a) Debt	\$	-		XXX
(b) Funding Agreements	\$	-		
(c) Other	\$	-		XXX
(d) Aggregate Total (a+b+c)	\$	-	\$	-

b. Maximum Amount During Reporting Period (Current Year)

	1	2	3
	Total 2+3	General Account	Protected Cell Account
1. Debt	\$	-	
2. Funding Agreements	\$	-	
3. Other	\$	-	
4. Aggregate Total (1+2+3)	\$	-	\$

11B(4)b4 (Columns 1, 2 and 3) should be equal to or greater than 11B(4)a1(d) (Columns 1, 2 and 3 respectively)

c. FHLB - Prepayment Obligations

Does the company have prepayment obligations under the following arrangements (YES/NO)?

- 1. Debt
- 2. Funding Agreements
- 3. Other

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

A. Defined Benefit Plan
 Company input

(1) Change in benefit obligation

a. Pension Benefits

	Overfunded		Underfunded	
	2025	2024	2025	2024
1. Benefit obligation at beginning of year				
2. Service cost				
3. Interest cost				
4. Contribution by plan participants				
5. Actuarial gain/loss				
6. Foreign currency exchange rate changes				
7. Benefits paid				
8. Plan amendments				
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$	-	\$	-

b. Postretirement Benefits

NOTES TO FINANCIAL STATEMENTS

	Overfunded		Underfunded	
	2025	2024	2025	2024
1. Benefit obligation at beginning of year				
2. Service cost				
3. Interest cost				
4. Contribution by plan participants				
5. Actuarial gain/loss				
6. Foreign currency exchange rate changes				
7. Benefits paid				
8. Plan amendments				
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$ -	\$ -	\$ -	\$ -

c. Special or Contractual Benefits Per SSAP No. 11

	Overfunded		Underfunded	
	2025	2024	2025	2024
1. Benefit obligation at beginning of year				
2. Service cost				
3. Interest cost				
4. Contribution by plan participants				
5. Actuarial gain/loss				
6. Foreign currency exchange rate changes				
7. Benefits paid				
8. Plan amendments				
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$ -	\$ -	\$ -	\$ -

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits Per SSAP No. 11	
	2025	2024	2025	2024	2025	2024
(2) Change in plan assets						
a. Fair value of plan assets at beginning of year						
b. Actual return on plan assets						
c. Foreign currency exchange rate changes						
d. Reporting entity contribution						
e. Plan participants' contributions						
f. Benefits paid						
g. Business combinations, divestitures and settlements						
h. Fair value of plan assets at end of year	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

(3) Funded status

	Pension Benefits		Postretirement Benefits	
	2025	2024	2025	2024
a. Components:				
1. Prepaid benefit costs				
2. Overfunded plan assets				
3. Accrued benefit costs				
4. Liability for pension benefits				
b. Assets and liabilities recognized:				
1. Assets (nonadmitted)				
2. Liabilities recognized				
c. Unrecognized liabilities				

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits Per SSAP No. 11	
	2025	2024	2025	2024	2025	2024
(4) Components of net periodic benefit cost						
a. Service cost						
b. Interest cost						
c. Expected return on plan assets						
d. Transition asset or obligation						
e. Gains and losses						
f. Prior service cost or credit						
g. Gain or loss recognized due to a settlement or curtailment						
h. Total net periodic benefit cost	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

(5) Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost

	Pension Benefits		Postretirement Benefits	
	2025	2024	2025	2024
a. Items not yet recognized as a component of net periodic cost - prior year				
b. Net transition asset or obligation recognized				
c. Net prior service cost or credit arising during the period				
d. Net prior service cost or credit recognized				
e. Net gain and loss arising during the period				
f. Net gain and loss recognized				
g. Items not yet recognized as a component of net periodic cost - current year	\$ -	\$ -	\$ -	\$ -

(6) Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost

	Pension Benefits		Postretirement Benefits	
	2025	2024	2025	2024
a. Net transition asset or obligation				

NOTES TO FINANCIAL STATEMENTS

- b. Net prior service cost or credit
- c. Net recognized gains and losses

(7) Weighted-average assumptions used to determine net periodic benefit cost as of the end of current period:

	2025	2024
a. Weighted average discount rate		
b. Expected long-term rate of return on plan assets		
c. Rate of compensation increase		
d. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)		

Weighted average assumptions used to determine projected benefit obligations as of end of current period:

	2025	2024
e. Weighted average discount rate		
f. Rate of compensation increase		
g. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)		

(8) Company input

(9) Company input

(10) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the years indicated:

	Amount
a. 2026	
b. 2027	
c. 2028	
d. 2029	
e. 2030	
f. 2031 through 20xx	

(11) Company input

(12) Company input

(13) Company input

(14) Company input

(15) Company input

(16) Company input

(17) Company input

B. Company input

C. The fair value of each class of plan assets

(1) Fair Value Measurements of Plan Assets at Reporting Date

Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
Total Plan Assets	\$ -	\$ -	\$ -	\$ -

(2) Company input

D. Company input

E. Defined Contribution Plan
Company input

F. Multiemployer Plans
Company input

G. Consolidated/Holding Company Plans
Company input

H. Postemployment Benefits and Compensated Absences
Company input

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
Company input

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

A. Company input

B. Company input

C. Company input

D. Company input

E. Company input

F. Company input

G. Company input

H. Company input

I. Company input

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

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

1 Item Number	2 Date Issued	3 Interest Rate	4 Original Issue Amount of Note	5 Is Surplus Note Holder a Related Party (Y/N)	6 Carrying Value of Note Prior Year	7 Carrying Value of Note Current Year*	8 Unapproved Interest And/Or Principal

NOTES TO FINANCIAL STATEMENTS

Total	XXX	XXX	\$ -	XXX	\$ -	\$ -	\$ -
-------	-----	-----	------	-----	------	------	------

* Total should agree with Page 3, Line 33.

1 Item Number	9 Current Year Interest Expense Recognized	10 Life-To-Date Interest Expense Recognized	11 Current Year Interest Offset Percentage (not including amounts paid to a 3rd party liquidity provider)	12 Current Year Principal Paid	13 Life-To-Date Principal Paid	14 Date of Maturity
Total	\$ -	\$ -	XXX	\$ -	\$ -	XXX

1 Item Number	15 Are Surplus Note Payments Contractually Linked? (Y/N)	16 Surplus Note Payments Subject to Administrative Offsetting Provisions? (Y/N)	17 Were Surplus Note Proceeds Used to Purchase an Asset Directly From the Holder of the Surplus Note? (Y/N)	18 Is Asset Issuer a Related Party (Y/N)	19 Type of Assets Received Upon Issuance
Total	XXX	XXX	XXX	XXX	XXX

1 Item Number	20 Principal Amount of Assets Received Upon Issuance	21 Book/Adjusted Carry Value of Assets	22 Is Liquidity Source a Related Party to the Surplus Note Issuer? (Y/N)
Total	\$ -	\$ -	XXX

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

Change in Year Surplus	Change in Gross Paid-in and Contributed Surplus
------------------------	---

M. Company input

NOTE 14 Liabilities, Contingencies and Assessments

A. Contingent Commitments
Company input

(1) Total contingent liabilities:

(2)

(1) Nature and circumstances of guarantee and key attributes, including date and duration of agreement	(2) Liability recognition of guarantee. (Include amount recognized at inception. If no initial recognition, document exception allowed under SSAP No. 5.)	(3) Ultimate financial statement impact if action under the guarantee is required	(4) Maximum potential amount of future payments (undiscounted) the guarantor could be required to make under the guarantee. If unable to develop an estimate, this should be specifically noted.	(5) Current status of payment or performance risk of guarantee. Also provide additional discussion as warranted
Total	\$ -	XXX	\$ -	XXX

(3)

Amount

NOTES TO FINANCIAL STATEMENTS

- a. Aggregate Maximum Potential of Future Payments of All Guarantees (undiscounted) the guarantor could be required to make under guarantees. (Should equal total of Column 4 for (2) above.)
- b. Current Liability Recognized in F/S:
 - 1. Noncontingent Liabilities
 - 2. Contingent Liabilities
- c. Ultimate Financial Statement Impact if action under the guarantee is required:
 - 1. Investments in SCA
 - 2. Joint Venture
 - 3. Dividends to Stockholders (capital contribution)
 - 4. Expense
 - 5. Other
 - 6. Total (1+2+3+4+5) (Should equal (3)a.) \$ -

B. Assessments

- (1) Company input
- (2) a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end \$ -
- b. Decreases current period:
- c. Increases current period:
- d. Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end \$ -

- (3) a. Discount Rate Applied

b. The Undiscounted and Discounted Amount of the Guaranty Fund Assessments and Related Assets by Insolvency

Name of the Insolvency	Guaranty Fund Assessment		Related Assets	
	Undiscounted	Discounted	Undiscounted	Discounted

c. Number of Jurisdictions, Ranges of Years Used to Discount and Weighted Average Number of Years of the Discounting Time Period for Payables and Recoverables by Insolvency

Name of the Insolvency	Payables			Recoverables		
	Number of Jurisdictions	Range of Years	Weighted Average Number of Years	Number of Jurisdictions	Range of Years	Weighted Average Number of Years

C. Gain Contingencies
Company input

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits

Direct

- (1) The company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits
- (2) Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period
- (3) Indicate whether claim count information is disclosed per claim or per claimant

E. Product Warranties

- (1) Company input
- (2) Reconciliation of aggregate product warranty liability
 - a. Product warranty liability beginning balance \$ -
 - b. Reductions for payments made under the warranty
 - c. Liability accrual for product warranties issued during the current period
 - d. Change in liability accrual for product warranties issued in previous periods
 - e. Product warranty liability ending balance \$ -

F. Joint and Several Liabilities
Company input

G. All Other Contingencies
Company input

NOTE 15 Leases

A. Lessee Operating Lease:

- (1) Company input
- (2) a. At January 1, 2025, the minimum aggregate rental commitments are as follows:

- 1. 2025
- 2. 2026

Operating
Leases

NOTES TO FINANCIAL STATEMENTS

3. 2027		
4. 2028		
5. 2029		
6. Thereafter		
7. Total (sum of 1 through 6)	\$	-

(3) Company input

B. Lessor Leases

(1) Company input

c. Future minimum lease payment receivables under noncancelable leasing arrangements as of the end of current period are as follows:

		Operating Leases
1. 2025		
2. 2026		
3. 2027		
4. 2028		
5. 2029		
6. Thereafter		
7. Total (sum of 1 through 6)	\$	-

d. Company input

(2) Leveraged Leases

Company input

b. The Company's investment in leveraged leases relates to equipment used primarily in the transportation industries. The component of net income from leveraged leases as of the end of current period and December 31, 2024 were as shown below:

	2025		2024
1. Income from leveraged leases before income tax including investment tax credit			
2. Less current income tax			
3. Net income from leveraged leases (1 - 2)	\$	-	\$ -

c. The components of the investment in leveraged leases as of the end of current period and December 31, 2024 were as shown below:

	2025		2024
1. Lease contracts receivable (net of principal and interest on non-recourse financing)			
2. Estimated residual value of leased assets			
3. Unearned and deferred income			
4. Investment in leveraged leases			
5. Deferred income taxes related to leveraged leases			
6. Net investment in leveraged leases	\$	-	\$ -

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

(1) The table below summarizes the face amount of the Company's financial instruments with off-balance sheet risk.

	ASSETS		LIABILITIES	
	2025	2024	2025	2024
a. Swaps				
b. Futures				
c. Options				
d. Total (a+b+c)	\$	-	\$	-

(2) Company input

(3) Company input

(4) Company input

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

A. Transfers of Receivables Reported as Sales
Company input

B. Transfer and Servicing of Financial Assets
Company input

1	2	3	4	5	6	7	8
Identification of Transaction	BACV at Time of Transfer	Original Reporting Schedule of the Transferred Assets	Amount Derecognized from Sale Transaction	Amount that continues to be recognized in the statement of financial position (Col. 2 minus 4)	BACV of acquired interests in transferred assets	Reporting Schedule of Acquired Interests	Percentage of interests of a reporting entity's transferred assets acquired by affiliated entities

C. Wash Sales

(1) Company input

(2) The details by NAIC designation 3 or below, or unrated of securities sold during the current quarter and reacquired within 30 days of the sale date are:

Description	NAIC Designation	Number of Transactions	Book Value of Securities Sold	Cost of Securities Repurchased	Gain/(Loss)
-------------	------------------	------------------------	-------------------------------	--------------------------------	-------------

NOTES TO FINANCIAL STATEMENTS

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

A. ASO Plans:

The gain from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans was as follows during 2025:

	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a. Net reimbursement for administrative Expenses (including administrative fees) in excess of actual expenses			\$ -
b. Total net other income or expenses (including interest paid to or received from plans)			\$ -
c. Net gain or (loss) from operations (a+b)	\$ -	\$ -	\$ -
d. Total claim payment volume			\$ -

B. ASC Plans:

The gain from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans was as follows during 2025:

	ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a. Gross reimbursement for medical cost incurred			\$ -
b. Gross administrative fees accrued			\$ -
c. Other income or expenses (including interest paid to or received from plans)			\$ -
d. Gross expenses incurred (claims and administrative) (a+b+c)	\$ -	\$ -	\$ -
e. Total net gain or loss from operations			\$ -

**C. Medicare or Similarly Structured Cost Based Reimbursement Contract
Company input**

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Name and Address of Managing General Agent or Third Party Administrator	FEIN NUMBER	Exclusive Contract	Types of Business Written	Type of Authority Granted	Total Direct Premiums Written/Produced By
Brown & Brown	95-3679538	Yes	Liability	U	\$ 770,598
Total	XXX	XXX	XXX	XXX	\$ 770,598

C - Claims Payment
 CA - Claims Adjustment
 R - Reinsurance Ceding
 B - Binding Authority
 P - Premium Collection
 U - Underwriting

NOTE 20 Fair Value Measurements

A.

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Total assets at fair value/NAV	\$ -	\$ -	\$ -	\$ -	\$ -

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

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

Description	Ending Balance as of Prior Quarter End	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance for Current Quarter End
a. Assets										
Total Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Description	Ending Balance as of Prior Quarter End	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance for Current Quarter End
b. Liabilities										
Total Liabilities	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

(3) Company input

NOTES TO FINANCIAL STATEMENTS

(4) Company input

(5) Company input

B. Company input

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 83,647,016	\$ 87,986,309		\$ 83,647,016			
Cash, cash equivalents and	\$ 1,784,270	\$ 1,784,270	\$ 1,784,270				
Other Invested Assets	\$ 82,090,597	\$ 84,862,515	\$ 24,756,172	\$ 57,334,425			

D. Not Practicable to Estimate Fair Value

Type or Class of Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation

E. Company input

NOTE 21 Other Items

A. Unusual or Infrequent Items
Company input

B. Troubled Debt Restructuring: Debtors
Company input

C. Other Disclosures
Company input

D. Business Interruption Insurance Recoveries
Company input

E. State Transferable and Non-transferable Tax Credits

(1) Carrying Value of Transferable and Non-transferable State Tax Credits Gross of any Related Tax Liabilities and Total Unused Transferable and Non-transferable State Tax Credits by State and in Total

Description of Transferable and Non-transferable Tax Credits	Jurisdiction	Carrying Value	Unused Amount
Total		\$ -	\$ -

(2) Total unused tax credits by jurisdiction, disaggregated by transferable/certificated and non-transferable

	Jurisdiction *	Transferable / Certificated	Nontransferable	Total
a. State				
	Total	\$ -	\$ -	\$ -
b. Federal				\$ -
c. Total (a+b)		\$ -	\$ -	\$ -

* Only applicable to State section of table

(3) Company input

(4) Company input

(5) State and Federal Tax Credits Admitted and Nonadmitted disaggregated by Transferable/Certificated and Non-transferable

	<u>Total Admitted</u>	<u>Total Nonadmitted</u>
a. State		
1. Transferable		
2. Non-transferable		
b. Federal		
1. Transferable		
2. Non-transferable		

F. Subprime Mortgage Related Risk Exposure

(1) Company input

(2) Direct exposure through investments in subprime mortgage loans.

	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Value of Land and Buildings	Other-Than-Temporary Impairment Losses Recognized	Default Rate
a. Mortgages in the process of foreclosure					
b. Mortgages in good standing					
c. Mortgages with restructure terms					
d. Total (a+b+c)	\$ -	\$ -	\$ -	\$ -	XXX

(3) Direct exposure through other investments.

NOTES TO FINANCIAL STATEMENTS

	Actual Cost	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Other-Than-Temporary Impairment Losses Recognized
a. Residential mortgage backed securities				
b. Collateralized debt obligations				
c. Equity investment in SCAs *				
d. Other assets				
e. Total (a+b+c+d)				

* These investments comprise _____ of the companies invested assets.

(4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage.

	Losses Paid in the Current Year	Losses Incurred in the Current Year	Case Reserves at End of Current Period	IBNR Reserves at End of Current Period
a. Mortgage Guaranty Coverage				
b. Financial Guaranty Coverage				

	Losses Paid in the Current Year	Losses Incurred in the Current Year	Case Reserves at End of Current Period	IBNR Reserves at End of Current Period
c. Other Lines (specify):				
d. Total (Sum of a through c)	\$ -	\$ -	\$ -	\$ -

G. Insurance-Linked Securities (ILS) Contracts

	Number of Outstanding ILS Contracts	Aggregate Maximum Proceeds
Management of Risk Related To:		
(1) Directly-Written Insurance Risks		
a. ILS Contracts as Issuer		
b. ILS Contracts as Ceding Insurer		
c. ILS Contracts as Counterparty		
(2) Assumed Insurance Risks		
a. ILS Contracts as Issuer		
b. ILS Contracts as Ceding Insurer		
c. ILS Contracts as Counterparty		

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

- (1) Amount of admitted balance that could be realized from an investment vehicle
- (2) Percentage Bonds
- (3) Percentage Stocks
- (4) Percentage Mortgage Loans
- (5) Percentage Real Estate
- (6) Percentage Cash and Short-Term Investments
- (7) Percentage Derivatives
- (8) Percentage Other Invested Assets

NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:
Company input

Type II – Nonrecognized Subsequent Events:
Company input

NOTE 23 Reinsurance

A. Unsecured Reinsurance Recoverables

Individual Reinsurers with Unsecured Reinsurance Recoverables Exceeding 3% of Policyholder Surplus

Individual Reinsurers Who Are Not Members of a Group

FEIN	Reinsurer Name	Unsecured Amount
	detail row 1	\$ -
	detail row 2	\$ -

Individual Reinsurers Who Are Members of a Group

Group Code	FEIN	Reinsurer Name	Unsecured Amount
		detail row 1	\$ -
		detail row 2	\$ -

All Members of the Groups Shown above with Unsecured Reinsurance Recoverables

Group Code	FEIN	Reinsurer Name	Unsecured Amount
		detail row 1	XXX
		detail row 2	XXX
Total			\$ -
		detail row 1	XXX
		detail row 2	XXX
Total			\$ -
		detail row 1	XXX
		detail row 2	XXX

NOTES TO FINANCIAL STATEMENTS

Total	\$ -
-------	------

B. Reinsurance Recoverable in Dispute

Name of Reinsurer	Total Amount in Dispute (Including IBNR)	Notification	Arbitration	Litigation
-------------------	--	--------------	-------------	------------

C. Reinsurance Assumed and Ceded

(1)

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates					\$ -	\$ -
b. All Other					\$ -	\$ -
c. Total (a+b)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d. Direct Unearned Premium Reserve						

(2)

	Direct	Assumed	Ceded	Net
a. Contingent Commission				\$ -
b. Sliding Scale Adjustments				\$ -
c. Other Profit Commission Arrangements				\$ -
d. TOTAL (a+b+c)	\$ -	\$ -	\$ -	\$ -

(3)

Protected Cell Name	Covered Exposure	Ultimate Exposure Amt.	Fair Value of Assets as of Statement Date	Initial Contract Date of Securitization Instrument	Maturity Date of Securitized Instrument
TOTAL	XXX	\$ -	\$ -	XXX	XXX

D. Uncollectible Reinsurance

(1) The Company has written off in the current year reinsurance balances due from the companies listed below, the amount of:

Which is reflected as:

- a. Losses incurred
- b. Loss adjustment expenses incurred
- c. Premiums earned
- d. Other

e.	Company	Amount
----	---------	--------

E. Commutation of Reinsurance Reflected in Income and Expenses.

The company has reported in its operations in the current year as a result of commutation of reinsurance with the companies listed below, amounts that are reflected as:

- (1) Losses incurred
- (2) Loss adjustment expenses incurred
- (3) Premiums earned
- (4) Other

(5)	Company	Amount
-----	---------	--------

F. Retroactive Reinsurance

(1)

As:	Reported Company	
	Assumed	Ceded
a. Reserves Transferred:		
1. Initial Reserves		
2. Adjustments - Prior Year (s)		
3. Adjustments - Current Year		
4. Current Total (1+2+3)	\$ -	\$ -
b. Consideration Paid or Received:		
1. Initial Consideration		
2. Adjustments - Prior Year (s)		
3. Adjustments - Current Year		
4. Current Total (1+2+3)	\$ -	\$ -
c. Paid Losses Reimbursed or Recovered:		
1. Prior Year (s)		
2. Current Year		
3. Current Total (1+2)	\$ -	\$ -
d. Special Surplus from Retroactive Reinsurance:		
1. Initial Surplus Gain or Loss		
2. Adjustments - Prior Year (s)		
3. Adjustments - Current Year		

NOTES TO FINANCIAL STATEMENTS

4. Current Year Restricted Surplus		\$	-		\$	-
5. Cumulative Total Transferred to Unassigned Funds (1+2+3+4)		\$	-		\$	-

e. All cedents and reinsurers involved in all transactions included in summary totals above:

Company		Assumed Amount		Ceded Amount	
Total		\$	-	\$	-

* Total amounts must agree with totals in a.4 above. Include the NAIC Company Code or Alien Insurer Identification Number for each insurer listed.

f. Total Paid Loss/LAE amounts recoverable (for authorized, reciprocal jurisdiction, unauthorized and certified reinsurers), any amounts more than 90 days overdue (for authorized, reciprocal jurisdiction, unauthorized and certified reinsurers), and for amounts recoverable the collateral held (for unauthorized and certified reinsurers) as respects amounts recoverable from unauthorized and certified reinsurers:

1. Authorized Reinsurers

Company		Total Paid/Loss/LAE Recoverable		Amounts Over 90 Days Overdue	
Total		\$	-	\$	-

2. Unauthorized Reinsurers

Company		Total Paid/Loss/LAE Recoverable		Amounts Over 90 Days Overdue	Collateral Held
Total		\$	-	\$	-

3. Certified Reinsurers

Company		Total Paid/Loss/LAE Recoverable		Amounts Over 90 Days Overdue	Collateral Held
Total		\$	-	\$	-

4. Reciprocal Jurisdiction Reinsurers

Company		Total Paid/Loss/LAE Recoverable		Amounts Over 90 Days Overdue	
Total		\$	-	\$	-

G. Reinsurance Accounted for as a Deposit

Description	Interest Income	Cash Recoveries	Deposit Balance

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements

Company input

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

(1) Reporting Entity Ceding to Certified Reinsurer Whose Rating Was Downgraded or Status Subject to Revocation

a.

Name of Certified Reinsurer	Relationship to Reporting Entity	Date of Action	Jurisdiction of Action	Collateral Percentage Requirement		Net Obligation Subject to Collateral	Collateral Required (but not received)
				Before	After		

(2) Reporting Entity's Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Date of Action	Jurisdiction of Action	Collateral Percentage Requirement		Net Obligation Subject to Collateral	Collateral Required (but not yet Funded)
		Before	After		

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

(1) Company input

(2) The amount of unexhausted limit as of the reporting date.

NOTES TO FINANCIAL STATEMENTS

Name of Reinsurer

Amount of Unexhausted Limit

K. Reinsurance Credit
Company input

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Company input

B. Company input

C. Company input

D. Medical loss ratio rebates required pursuant to the Public Health Service Act.

	1	2	3	4	5
	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Reporting Year					
(1) Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	\$ -
(2) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	\$ -
(3) Medical loss ratio rebates unpaid	\$ -	\$ -	\$ -	\$ -	\$ -
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ -
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	\$ -
(8) Medical loss ratio rebates paid					\$ -
(9) Medical loss ratio rebates unpaid					\$ -
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ -

E. (1) For Ten Percent (10%) Method of Determining Nonadmitted Retrospective Premium

- a. Total accrued retro premium
- b. Unsecured amount
- c. Less: Nonadmitted amount (10%) \$ -
- d. Less: Nonadmitted for any person for whom agents' balances or uncollected premiums are nonadmitted
- e. Admitted amount (a) - (c) - (d) \$ -

(2) For Quality Rating Method of Determining Nonadmitted Retrospective Premium

	(1)	(2)	(3)	(4)	
	Insured's Current Quality Rating	Total Amount	Unsecured Balances %	Nonadmitted Amount (2) x %	Admitted Amount (1) - (3)
a.	1		1%	\$ -	\$ -
b.	2		2%	\$ -	\$ -
c.	3		5%	\$ -	\$ -
d.	4		10%	\$ -	\$ -
e.	5		20%	\$ -	\$ -
f.	6		100%	\$ -	\$ -
g.	Nonadmitted for any person for whom agents' balances or uncollected premiums are nonadmitted				
h.	Total (a) through (f)				
- (g)		\$ -	\$ -	\$ -	\$ -

F. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year

Amount

- a. Permanent ACA Risk Adjustment Program
 - Assets
 - 1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments)
 - Liabilities
 - 2. Risk adjustment user fees payable for ACA Risk Adjustment
 - 3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)
 - Operations (Revenue & Expense)
 - 4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment
 - 5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance.

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
	1	2	3	4	5	6	7	8	9	10

NOTES TO FINANCIAL STATEMENTS

	Receivable	Payable	Receivable	Payable	Receivable	Payable	Receivable	Payable	Ref	Receivable	Payable
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)					\$ -	\$ -			A	\$ -	\$ -
2. Premium adjustments (payable) (including high risk pool premium)					\$ -	\$ -			B	\$ -	\$ -
3. Subtotal ACA Permanent Risk Adjustment Program	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -

Explanations of Adjustments

- A.
- B.

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

Company input

NOTE 26 Intercompany Pooling Arrangements

Company input

NOTE 27 Structured Settlements

	Loss Reserves Eliminated by Annuities	Unrecorded Loss Contingencies
27A. Structured Settlements		
27B.	Licensed in Company's State of Domicile Yes/No	Statement Value (i.e., Present Value) of Annuities
	Life Insurance Company And Location	

NOTE 28 Health Care Receivables

A. Pharmaceutical Rebate Receivables

Date	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing

B. Risk-Sharing Receivables

Calendar Year	Evaluation Period Year Ending	Risk Sharing Receivable as Estimated in the Prior Year	Risk Sharing Receivable as Estimated in the Current Year	Risk Sharing Receivable Billed	Risk Sharing Receivable Not Yet Billed	Actual Risk Sharing Amounts Received in Year Billed	Actual Risk Sharing Amounts Received First Year Subsequent	Actual Risk Sharing Amounts Received Second Year Subsequent	Actual Risk Sharing Amounts Received - All Other

NOTE 29 Participating Policies

Company input

NOTE 30 Premium Deficiency Reserves

- 1. Liability carried for premium deficiency reserves
- 2. Date of the most recent evaluation of this liability
- 3. Was anticipated investment income utilized in the calculation?

NOTE 31 High Deductibles

Company input

A. Reserve Credit Recorded on Unpaid Claims and Amount Billed and Recoverable on Paid Claims for High Deductibles

(1) Counter Party Exposure Recorded on Unpaid Claims and Billed Recoverables on Paid Claims

Annual Statement Line of Business (ASL)		3	4	5	6
1	2	Gross (of High Deductible) Loss Reserves	Reserve Credit for High Deductibles	Billed Recoverables on Paid Claims	Total High Deductibles and Billed Recoverables (Col 4 + Col 5)
ASL #	ASL Description				
Total		\$ -	\$ -	\$ -	\$ -

(2) Unsecured Amounts of High Deductibles

NOTES TO FINANCIAL STATEMENTS

- a. Total high deductibles and billed recoverables on paid claims (Should equal total line for Column 6 for A(1) above)
- b. Collateral on balance sheet (Must be equal to or greater than zero)
- c. Collateral off balance sheet (Must be equal to or greater than zero)

- d. Total unsecured deductibles and billed recoverables on paid claims d=a-(b+c) (Must be equal to or greater than zero) \$ -
- e. Percentage unsecured 0.0%

- (3) High Deductible Recoverables Amounts on Paid Claims
- a. Amount of overdue nonadmitted (either due to aging or collateral)
 - b. Total over 90 days overdue admitted
 - c. Total overdue (a+b) \$ -

(4) The Deductible Amounts for the Highest Ten Unsecured High Deductible Policies

Counterparty Ranking	Top Ten Unsecured High Deductibles Amounts
----------------------	--

- Counterparty 1
- Counterparty 2
- Counterparty 3
- Counterparty 4
- Counterparty 5
- Counterparty 6
- Counterparty 7
- Counterparty 8
- Counterparty 9
- Counterparty 10

B. Unsecured High Deductible Recoverables for Individual Obligors Part of a Group Under the Same Management or Control Which Are Greater Than 1% of Capital and Surplus. For this purpose, a group of entities under common control shall be regarded as a single customer.

(1) Total Group Unsecured Aggregate Recoverable

Group Name	Total Unsecured Aggregate Recoverable
------------	---------------------------------------

(2) Obligors and Related Members in the Group

Group Name	Obligors and Related Group Members
------------	------------------------------------

NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

A. Tabular Discount

	Tabular Discount Included in Schedule P, Part 1*	
	(1) Case	(2) IBNR
1. Homeowners/Farmowners		
2. Private Passenger Auto Liability/Medical		
3. Commercial Auto/Truck Liability/Medical		
4. Workers' Compensation		
5. Commercial Multiple Peril		
6. Medical Professional Liability - occurrence		
7. Medical Professional Liability - claims-made		
8. Special Liability		
9. Other Liability - occurrence		
10. Other Liability - claims-made		
11. Special Property		
12. Auto Physical Damage		
13. Fidelity, Surety		
14. Other (including Credit, Accident & Health)		
15. International		
16. Reinsurance Nonproportional Assumed Property		
17. Reinsurance Nonproportional Assumed Liability		
18. Reinsurance Nonproportional Assumed Financial Lines		
19. Products Liability - occurrence		
20. Products Liability - claims-made		
21. Financial Guaranty/Mortgage Guaranty		
22. Warranty		
23. Total (Sum of Lines 1 through 22)	\$ -	\$ -

* Must exclude medical loss reserves and all loss adjustment expense reserves.

B. Nontabular Discount

	(1) Case	(2) IBNR	(3) Defense & Cost Containment Expense	(4) Adjusting & Other Expense
1. Homeowners/Farmowners				
2. Private Passenger Auto Liability/Medical				
3. Commercial Auto/Truck Liability/Medical				
4. Workers' Compensation				
5. Commercial Multiple Peril				
6. Medical Professional Liability - occurrence				

NOTES TO FINANCIAL STATEMENTS

7. Medical Professional Liability - claims-made				
8. Special Liability				
9. Other Liability - occurrence				
10. Other Liability - claims-made				
11. Special Property				
12. Auto Physical Damage				
13. Fidelity, Surety				
14. Other (including Credit, Accident & Health)				
15. International				
16. Reinsurance Nonproportional Assumed Property				
17. Reinsurance Nonproportional Assumed Liability				
18. Reinsurance Nonproportional Assumed Financial Lines				
19. Products Liability - occurrence				
20. Products Liability - claims-made				
21. Financial Guaranty/Mortgage Guaranty				
22. Warranty				
23. Total (Sum of Lines 1 through 22)	\$ -	\$ -	\$ -	\$ -

** Should include medical loss reserves and all loss adjustment expense reserves, whether reported as tabular or nontabular in Schedule P.

C. Company input

NOTE 33 Asbestos/Environmental Reserves

A. Company input

(1) Direct

	2021	2022	2023	2024	2025
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves (a+b-c):	\$ -	\$ -	\$ -	\$ -	\$ -

(2) Assumed Reinsurance

	2021	2022	2023	2024	2025
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves (a+b-c):	\$ -	\$ -	\$ -	\$ -	\$ -

(3) Net of Ceded Reinsurance

	2021	2022	2023	2024	2025
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves (a+b-c):	\$ -	\$ -	\$ -	\$ -	\$ -

B. State the amount of the ending reserves for Bulk + IBNR included in A (Loss & LAE):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

C. State the amount of the ending reserves for loss adjustment expenses included in A (Case, Bulk + IBNR):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

D. Company input

(1) Direct

	2021	2022	2023	2024	2025
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves (a+b-c):	\$ -	\$ -	\$ -	\$ -	\$ -

(2) Assumed Reinsurance

	2021	2022	2023	2024	2025
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves (a+b-c):	\$ -	\$ -	\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

(3) Net of Ceded Reinsurance

	2021	2022	2023	2024	2025
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves (a+b-c):	\$ -	\$ -	\$ -	\$ -	\$ -

E. State the amount of the ending reserves for Bulk + IBNR included in D (Loss & LAE):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

F. State the amount of the ending reserves for loss adjustment expenses included in D (Case, Bulk + IBNR):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

NOTE 34 Subscriber Savings Accounts

Company input

NOTE 35 Multiple Peril Crop Insurance

Company input

NOTE 36 Financial Guaranty Insurance

A.

- (1) Financial guaranty insurance contracts where premiums are received as installment payments over the period of the contract, rather than at inception:

a. Company input

b. Schedule of premiums (undiscounted) expected to be collected under all installment contracts:

1. (a) 1st Quarter 2026
- (b) 2nd Quarter 2026
- (c) 3rd Quarter 2026
- (d) 4th Quarter 2026
- (e) Year 2027
- (f) Year 2028
- (g) Year 2029
- (h) Year 2030
2. (a) 2031 through 2035
- (b) 2036 through 2040
- (c) 2041 through 2045
- (d) 2046 through 2050
- (e) 2051 through 2055
- (f) 2056 through 2060
- (g) 2061 through 2065
- (h) 2066 through 2070
- (i) 2071 through 2075
- (j) 2076 through 2080
- (k) 2081 through 2085
- (l) 2086 through 2090
- (m) 2091 through 2095
- (n) 2096 through 2100
- (o) 2101 through 2105
- (p) 2106 through 2110
- (q) 2111 through 2115
- (r) 2116 through 2120
- (s) 2121 through 2125
- (t) 2126 through 2130
- (u) 2131 through 2135
- (v) 2136 through 2140
- (w) 2141 through 2145
- (x) 2146 through 2150
- (y) 2151 through 2155

c. Roll forward of the expected future premiums (undiscounted), including:

1. Expected future premiums - Beginning of Year
2. Less - Premium payments received for existing installment contracts
3. Add - Expected premium payments for new installment contracts
4. Adjustments to the expected future premium payments
5. Expected future premiums - End of Year (1-2+3+4)

\$ -

(2) Non-installment contracts:

a. Company input

b. Schedule of the future expected earned premium revenue on non-installment contracts as of the latest date of the statement of financial position:

1. (a) 1st Quarter 2026
- (b) 2nd Quarter 2026
- (c) 3rd Quarter 2026
- (d) 4th Quarter 2026
- (e) Year 2027

NOTES TO FINANCIAL STATEMENTS

- (f) Year 2028
- (g) Year 2029
- (h) Year 2030
- 2. (a) 2031 through 2035
- (b) 2036 through 2040
- (c) 2041 through 2045
- (d) 2046 through 2050
- (e) 2051 through 2055
- (f) 2056 through 2060
- (g) 2061 through 2065
- (h) 2066 through 2070
- (i) 2071 through 2075
- (j) 2076 through 2080
- (k) 2081 through 2085
- (l) 2086 through 2090
- (m) 2091 through 2095
- (n) 2096 through 2100
- (o) 2101 through 2105
- (p) 2106 through 2110
- (q) 2111 through 2115
- (r) 2116 through 2120
- (s) 2121 through 2125
- (t) 2126 through 2130
- (u) 2131 through 2135
- (v) 2136 through 2140
- (w) 2141 through 2145
- (x) 2146 through 2150
- (y) 2151 through 2155

(3) Claim liability

a. Company input

b. Significant components of the change in the claim liability for the period

Components	Amount
(1) Accretion of the discount	
(2) Changes in timing	
(3) New reserves for defaults of insured contracts	
(4) Change in deficiency reserves	
(5) Change in incurred but not reported claims	
(6) Total (1+2+3+4+5)	\$ -

(4) Company input

B. Schedule of insured financial obligations at the end of the period

	Surveillance Categories				Total
	A	B	C	D	
1. Number of policies					0
2. Remaining weighted-average contract period (in years)					
Insured contractual payments outstanding:					
3a. Insured contractual payments outstanding: Principal					\$ -
3b. Interest					\$ -
3c. Total (3a+3b)	\$ -	\$ -	\$ -	\$ -	\$ -
4. Gross claim liability					\$ -
Less:					
5a. Gross potential recoveries					\$ -
5b. Discount, net					\$ -
6. Net claim liability (4-5a-5b)	\$ -	\$ -	\$ -	\$ -	\$ -
7. Unearned premium reserve					\$ -
8. Reinsurance recoverables					\$ -

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island
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? Yes [] No [X]
If yes, complete Schedule Y, Parts 1 and 1A.
- 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.
.....
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. _____
- 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 the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 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? Yes [X] No [] N/A []
If yes, attach an explanation.
.....
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2024
- 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. 12/31/2019
- 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). 07/21/2021
- 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 by 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 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

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island
GENERAL INTERROGATORIES

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

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: \$
13. Amount of real estate and mortgages held in short-term investments: \$
- 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	\$
14.22 Preferred Stock	\$0	\$
14.23 Common Stock	\$0	\$
14.24 Short-Term Investments	\$0	\$
14.25 Mortgage Loans on Real Estate	\$0	\$
14.26 All Other	\$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	\$	\$

- 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 [] N/A [X]
 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 the 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

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island
GENERAL INTERROGATORIES

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 [] No [X]
- 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 [] No [X]

- 17.4 If yes, give full information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
Conning, Inc.	U.....

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [X] No []

- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [X] No []

- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
107423	Conning, Inc.	549300Z0G14KK37BDV40	SEC	DS.....

- 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:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

- Has the reporting entity self-designated 5GI securities? Yes [] No [X]

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

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

- Has the reporting entity self-designated PLGI securities? Yes [] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island
GENERAL INTERROGATORIES

PART 2 - PROPERTY & 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 [X] N/A []
 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:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
TOTAL			0	0	0	0	0	0	0	0

5. Operating Percentages:
- 5.1 A&H loss percent %
- 5.2 A&H cost containment percent %
- 5.3 A&H expense percent excluding cost containment expenses %
- 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 \$.....
- 6.3 Do you act as an administrator for health savings accounts? Yes [] No [X]
- 6.4 If yes, please provide the balance of the funds administered as of the reporting date \$.....
7. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [] No [X]
- 7.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No [X]

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
NONE						

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status (a)	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	770,598	676,706	877,820	302,327	8,881,609	19,269,158
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. U.S. Virgin Islands VI	N						
56. Northern Mariana Islands MP	N						
57. Canada CAN	N						
58. Aggregate Other Alien OT	XXX	0	0	0	0	0	0
59. Totals	XXX	770,598	676,706	877,820	302,327	8,881,609	19,269,158
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 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0

(a) Active Status Counts:

- | | | | |
|---|---|--|----|
| 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... | 1 | 4. Q - Qualified - Qualified or accredited reinsurer..... | 0 |
| 2. R - Registered - Non-domiciled RRGs..... | 0 | 5. D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile..... | 0 |
| 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLII)..... | 0 | 6. N - None of the above - Not allowed to write business in the state..... | 56 |

Schedule Y - Part 1

NONE

Schedule Y - Part 1A - Details of Insurance Holding Company System

NONE

Schedule Y - Part 1A - Explanations

NONE

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

PART 1 - LOSS EXPERIENCE

Line 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			0.0	0.0
2.1 Allied Lines			0.0	0.0
2.2 Multiple peril crop			0.0	0.0
2.3 Federal flood			0.0	0.0
2.4 Private crop			0.0	0.0
2.5 Private flood			0.0	0.0
3. Farmowners multiple peril			0.0	0.0
4. Homeowners multiple peril			0.0	0.0
5.1 Commercial multiple peril (non-liability portion)			0.0	0.0
5.2 Commercial multiple peril (liability portion)			0.0	0.0
6. Mortgage guaranty			0.0	0.0
8. Ocean marine			0.0	0.0
9.1 Inland marine			0.0	0.0
9.2 Pet insurance			0.0	0.0
10. Financial guaranty			0.0	0.0
11.1 Medical professional liability - occurrence	271,456	591,121	217.8	247.0
11.2 Medical professional liability - claims-made	137,052	428,100	312.4	479.9
12. Earthquake			0.0	0.0
13.1 Comprehensive (hospital and medical) individual			0.0	0.0
13.2 Comprehensive (hospital and medical) group			0.0	0.0
14. Credit accident and health			0.0	0.0
15.1 Vision only			0.0	0.0
15.2 Dental only			0.0	0.0
15.3 Disability income			0.0	0.0
15.4 Medicare supplement			0.0	0.0
15.5 Medicaid Title XIX			0.0	0.0
15.6 Medicare Title XVIII			0.0	0.0
15.7 Long-term care			0.0	0.0
15.8 Federal employees health benefits plan			0.0	0.0
15.9 Other health			0.0	0.0
16. Workers' compensation			0.0	0.0
17.1 Other liability - occurrence	112,461	(5,578)	(5.0)	0.1
17.2 Other liability - claims-made			0.0	0.0
17.3 Excess workers' compensation			0.0	0.0
18.1 Products liability - occurrence			0.0	0.0
18.2 Products liability - claims-made			0.0	0.0
19.1 Private passenger auto no-fault (personal injury protection)			0.0	0.0
19.2 Other private passenger auto liability			0.0	0.0
19.3 Commercial auto no-fault (personal injury protection)			0.0	0.0
19.4 Other commercial auto liability			0.0	0.0
21.1 Private passenger auto physical damage			0.0	0.0
21.2 Commercial auto physical damage			0.0	0.0
22. Aircraft (all perils)			0.0	0.0
23. Fidelity			0.0	0.0
24. Surety			0.0	0.0
26. Burglary and theft			0.0	0.0
27. Boiler and machinery			0.0	0.0
28. Credit			0.0	0.0
29. International			0.0	0.0
30. Warranty			0.0	0.0
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	0.0	0.0
35. Totals	520,969	1,013,643	194.6	251.8
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0.0	0.0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0.0	0.0

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business		1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire	0		
2.1	Allied Lines	0		
2.2	Multiple peril crop	0		
2.3	Federal flood	0		
2.4	Private crop	0		
2.5	Private flood	0		
3.	Farmowners multiple peril	0		
4.	Homeowners multiple peril	0		
5.1	Commercial multiple peril (non-liability portion)	0		
5.2	Commercial multiple peril (liability portion)	0		
6.	Mortgage guaranty	0		
8.	Ocean marine	0		
9.1	Inland marine	0		
9.2	Pet insurance	0		
10.	Financial guaranty	0		
11.1	Medical professional liability - occurrence	374,851	374,851	340,143
11.2	Medical professional liability - claims-made	189,305	189,305	199,795
12.	Earthquake	0		
13.1	Comprehensive (hospital and medical) individual	0		
13.2	Comprehensive (hospital and medical) group	0		
14.	Credit accident and health	0		
15.1	Vision only	0		
15.2	Dental only	0		
15.3	Disability income	0		
15.4	Medicare supplement	0		
15.5	Medicaid Title XIX	0		
15.6	Medicare Title XVIII	0		
15.7	Long-term care	0		
15.8	Federal employees health benefits plan	0		
15.9	Other health	0		
16.	Workers' compensation	0		
17.1	Other liability - occurrence	206,442	206,442	136,768
17.2	Other liability - claims-made	0		
17.3	Excess workers' compensation	0		
18.1	Products liability - occurrence	0		
18.2	Products liability - claims-made	0		
19.1	Private passenger auto no-fault (personal injury protection)	0		
19.2	Other private passenger auto liability	0		
19.3	Commercial auto no-fault (personal injury protection)	0		
19.4	Other commercial auto liability	0		
21.1	Private passenger auto physical damage	0		
21.2	Commercial auto physical damage	0		
22.	Aircraft (all perils)	0		
23.	Fidelity	0		
24.	Surety	0		
26.	Burglary and theft	0		
27.	Boiler and machinery	0		
28.	Credit	0		
29.	International	0		
30.	Warranty	0		
31.	Reinsurance - Nonproportional Assumed Property	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	770,598	770,598	676,706
DETAILS OF WRITE-INS				
3401.			
3402.			
3403.			
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0

STATEMENT AS OF MARCH 31, 2025 OF THE 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)	2025 Loss and LAE Payments on Claims Reported as of Prior Year-End	2025 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2025 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. 2022 + Prior	7,471	6,366	13,837	193	25	218	7,126	680	6,327	14,133	(152)	666	514
2. 2023	407	3,628	4,035	13	0	13	1,241	0	3,631	4,872	847	3	850
3. Subtotals 2023 + Prior	7,878	9,994	17,872	206	25	231	8,367	680	9,958	19,005	695	669	1,364
4. 2024	1,955	4,107	6,062	607	0	607	641	0	3,662	4,303	(707)	(445)	(1,152)
5. Subtotals 2024 + Prior	9,833	14,101	23,934	813	25	838	9,008	680	13,620	23,308	(12)	224	212
6. 2025	XXX	XXX	XXX	XXX	152	152	XXX	325	923	1,248	XXX	XXX	XXX
7. Totals	9,833	14,101	23,934	813	177	990	9,008	1,005	14,543	24,556	(12)	224	212
8. Prior Year-End Surplus As Regards Policyholders	146,823										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. (0.1)	2. 1.6	3. 0.9
													Col. 13, Line 7 As a % of Col. 1 Line 8
													4. 0.1

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island
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.

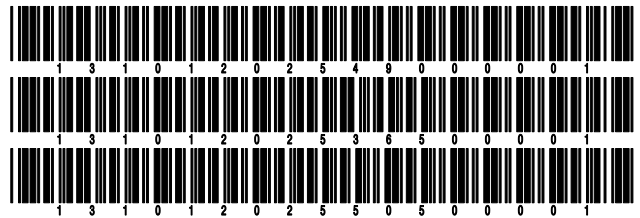
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	YES
3. Will the Medicare Part D Coverage Supplement be filed with the state 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
AUGUST FILING	
5. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A

Explanations:

- 1.
- 3.
- 4.

Bar Codes:

1. Trusteed Surplus Statement [Document Identifier 490]
3. Medicare Part D Coverage Supplement [Document Identifier 365]
4. Director and Officer Supplement [Document Identifier 505]



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		
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 the end of current period (Lines 1+2+3+4-5+6-7-8)		
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)		

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		
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 paid 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)		
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)		

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	84,995,497	78,901,210
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	705,339	2,700,295
4. Accrual of discount	(14,438)	33,230
5. Unrealized valuation increase/(decrease)	(823,883)	3,360,762
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium, depreciation and proportional amortization		0
9. Total foreign exchange change in book/adjusted carrying value		0
10. Deduct current year's other than temporary impairment recognized		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	84,862,515	84,995,497
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	84,862,515	84,995,497

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	88,269,482	90,595,834
2. Cost of bonds and stocks acquired	3,446,122	12,708,217
3. Accrual of discount	59,652	255,217
4. Unrealized valuation increase/(decrease)	0	
5. Total gain (loss) on disposals	(2,368)	(418,743)
6. Deduct consideration for bonds and stocks disposed of	3,744,155	14,682,664
7. Deduct amortization of premium	42,424	207,235
8. Total foreign exchange change in book/adjusted carrying value	0	
9. Deduct current year's other than temporary impairment recognized	0	
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	18,856
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	87,986,309	88,269,482
12. Deduct total nonadmitted amounts	0	
13. Statement value at end of current period (Line 11 minus Line 12)	87,986,309	88,269,482

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

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
ISSUER CREDIT OBLIGATIONS (ICO)								
1. NAIC 1 (a)	35,949,164	1,991,198	4,254,492	(514,344)	33,171,526	0	0	35,949,164
2. NAIC 2 (a)	18,966,305	498,620	0	505,606	19,970,531	0	0	18,966,305
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total ICO	54,915,469	2,489,818	4,254,492	(8,738)	53,142,057	0	0	54,915,469
ASSET-BACKED SECURITIES (ABS)								
8. NAIC 1	33,354,012	1,952,647	492,032	29,624	34,844,251	0	0	33,354,012
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total ABS	33,354,012	1,952,647	492,032	29,624	34,844,251	0	0	33,354,012
PREFERRED STOCK								
15. NAIC 1	0	0	0	0	0	0	0	0
16. NAIC 2	0	0	0	0	0	0	0	0
17. NAIC 3	0	0	0	0	0	0	0	0
18. NAIC 4	0	0	0	0	0	0	0	0
19. NAIC 5	0	0	0	0	0	0	0	0
20. NAIC 6	0	0	0	0	0	0	0	0
21. Total Preferred Stock	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock	88,269,481	4,442,465	4,746,524	20,886	87,986,308	0	0	88,269,481

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

NAIC 1 \$0 ; NAIC 2 \$0 ; NAIC 3 \$0 NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

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Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

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

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

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

N O N E

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

N O N E

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

N O N E

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	845,713	564,164
2. Cost of cash equivalents acquired	2,334,366	845,713
3. Accrual of discount	3,658	0
4. Unrealized valuation increase/(decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	1,845,713	564,164
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	1,338,024	845,713
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	1,338,024	845,713

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

N O N E

Schedule A - Part 3 - Real Estate Disposed

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends	9 NAIC Designation, NAIC Designation Modifier and SVO Admini- strative Symbol
91282C-LX-7	US TREASURY	01/03/2025	J.P. MORGAN		497,695	500,000	2,963	1.A
0019999999	Subtotal - Issuer Credit Obligations - U.S. Government Obligations (Exempt from RBC)				497,695	500,000	2,963	XXX
03027X-CP-3	AMERICAN TOWER CORPORATION	03/11/2025	J.P. MORGAN		498,620	500,000	0	2.B FE
76720A-AU-0	RIO TINTO FINANCE (USA) PLC	03/11/2025	CITIGROUP GLOBAL MARKETS		497,160	500,000	0	1.F FE
0089999999	Subtotal - Issuer Credit Obligations - Corporate Bonds (Unaffiliated)				995,780	1,000,000	0	XXX
0489999999	Total - Issuer Credit Obligations (Unaffiliated)				1,493,475	1,500,000	2,963	XXX
0499999999	Total - Issuer Credit Obligations (Affiliated)				0	0	0	XXX
0509999997	Total - Issuer Credit Obligations - Part 3				1,493,475	1,500,000	2,963	XXX
0509999998	Total - Issuer Credit Obligations - Part 5				XXX	XXX	XXX	XXX
0509999999	Total - Issuer Credit Obligations				1,493,475	1,500,000	2,963	XXX
31400U-U6-1	FNCL CB8704 6.000 06/01/54	01/03/2025	GOLDMAN SACHS		957,494	944,616	787	1.A
31418F-GY-7	FNCL MA5614 5.500 02/01/55	03/27/2025	GOLDMAN SACHS		995,153	1,000,429	4,127	1.A
1039999999	Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)				1,952,647	1,945,045	4,914	XXX
1889999999	Total - Asset-Backed Securities (Unaffiliated)				1,952,647	1,945,045	4,914	XXX
1899999999	Total - Asset-Backed Securities (Affiliated)				0	0	0	XXX
1909999997	Total - Asset-Backed Securities - Part 3				1,952,647	1,945,045	4,914	XXX
1909999998	Total - Asset-Backed Securities - Part 5				XXX	XXX	XXX	XXX
1909999999	Total - Asset-Backed Securities				1,952,647	1,945,045	4,914	XXX
2009999999	Total - Issuer Credit Obligations and Asset-Backed Securities				3,446,122	3,445,045	7,877	XXX
4509999997	Total - Preferred Stocks - Part 3				0	XXX	0	XXX
4509999998	Total - Preferred Stocks - Part 5				XXX	XXX	XXX	XXX
4509999999	Total - Preferred Stocks				0	XXX	0	XXX
5989999997	Total - Common Stocks - Part 3				0	XXX	0	XXX
5989999998	Total - Common Stocks - Part 5				XXX	XXX	XXX	XXX
5989999999	Total - Common Stocks				0	XXX	0	XXX
5999999999	Total - Preferred and Common Stocks				0	XXX	0	XXX
6009999999	Totals				3,446,122	XXX	7,877	XXX

STATEMENT AS OF MARCH 31, 2025 OF THE 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 CUSIP Identification	2 Description	3 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					15 Book/ Adjusted Carrying Value at Disposal Date	16 Foreign Exchange Gain (Loss) on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Bond Interest/ Stock Dividends Received During Year	20 Stated Contractual Maturity Date	21 NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol		
									10 Unrealized Valuation Increase/ (Decrease)	11 Current Year's (Amortization)/ Accretion	12 Current Year's Other Than Temporary Impairment Recognized	13 Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12)	14 Total Foreign Exchange Change in Book /Adjusted Carrying Value									
..452153-DE-6	STATE OF ILLINOIS	03/01/2025	MATURITY		200,000	200,000	207,196	200,452	0	(452)	0	(452)	0	200,000	0	0	0	5,000	03/01/2025	1.G FE		
..592112-QH-2	THE METROPOLITAN GOVERNMENT OF NASHVILLE	01/14/2025	RAYMOND JAMES		453,375	450,000	536,787	454,969	0	(357)	0	(357)	0	454,613	0	(1,238)	(1,238)	12,125	07/01/2029	1.B FE		
0049999999. Subtotal - Issuer Credit Obligations - Municipal Bonds - General Obligations (Direct and Guaranteed)					653,375	650,000	743,983	655,421	0	(809)	0	(809)	0	654,613	0	(1,238)	(1,238)	17,125	XXX	XXX		
..167593-RG-9	CHICAGO O'HARE AIRPORT	01/01/2025	CALLED AT 100		425,000	425,000	475,868	425,000	0	0	0	0	0	425,000	0	0	0	10,625	01/01/2030	1.E FE		
..196707-TQ-6	COLORADO STATE BOARD OF AGRICULTURE	03/01/2025	CALLED AT 100		425,000	425,000	495,758	426,437	0	(1,437)	0	(1,437)	0	425,000	0	0	0	10,625	03/01/2032	1.C FE		
..64763H-FK-6	NEW ORLEANS AVIATION BOARD	01/01/2025	CALLED AT 100		500,000	500,000	559,365	500,000	0	0	0	0	0	500,000	0	0	0	12,500	01/01/2040	1.F FE		
0059999999. Subtotal - Issuer Credit Obligations - Municipal Bonds - Special Revenues					1,350,000	1,350,000	1,530,991	1,351,437	0	(1,437)	0	(1,437)	0	1,350,000	0	0	0	33,750	XXX	XXX		
..314353-AA-1	FEDERAL EXPRESS CORPORATION 2020-1 PASS	02/20/2025	PAY DOWN		6,684	6,684	6,684	6,684	0	0	0	0	0	6,684	0	0	0	63	08/20/2035	1.D FE		
..354613-AK-7	FRANKLIN RESOURCES INC.	03/30/2025	MATURITY		725,000	725,000	723,746	724,965	0	35	0	35	0	725,000	0	0	0	10,331	03/30/2025	1.F FE		
..747525-AF-0	QUALCOMM INCORPORATED	02/04/2025	MILLENNIUM ADVISORS		498,495	500,000	489,950	499,510	0	116	0	116	0	499,626	0	(1,131)	(1,131)	3,594	05/20/2025	1.F FE		
0089999999. Subtotal - Issuer Credit Obligations - Corporate Bonds (Unaffiliated)					1,230,179	1,231,684	1,220,380	1,231,159	0	151	0	151	0	1,231,310	0	(1,131)	(1,131)	13,988	XXX	XXX		
..90783X-AA-9	UNION PACIFIC RAILROAD CO 2007-3 PASS TH	01/02/2025	PAY DOWN		12,037	12,037	12,037	12,037	0	0	0	0	0	12,037	0	0	0	372	01/02/2031	1.C FE		
..909318-AA-5	UNITED AIRLINES INC 2018-1AA PASS THROU	03/01/2025	PAY DOWN		6,533	6,533	6,533	6,533	0	0	0	0	0	6,533	0	0	0	114	09/01/2031	1.E FE		
0129999999. Subtotal - Issuer Credit Obligations - Single Entity Backed Obligations (Unaffiliated)					18,570	18,570	18,570	18,570	0	0	0	0	0	18,570	0	0	0	486	XXX	XXX		
0489999999. Total - Issuer Credit Obligations (Unaffiliated)					3,252,124	3,250,254	3,513,924	3,256,587	0	(2,095)	0	(2,095)	0	3,254,493	0	(2,369)	(2,369)	65,349	XXX	XXX		
0499999999. Total - Issuer Credit Obligations (Affiliated)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
0509999997. Total - Issuer Credit Obligations - Part 4					3,252,124	3,250,254	3,513,924	3,256,587	0	(2,095)	0	(2,095)	0	3,254,493	0	(2,369)	(2,369)	65,349	XXX	XXX		
0509999998. Total - Issuer Credit Obligations - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0509999999. Total - Issuer Credit Obligations					3,252,124	3,250,254	3,513,924	3,256,587	0	(2,095)	0	(2,095)	0	3,254,493	0	(2,369)	(2,369)	65,349	XXX	XXX		
..36179Y-FN-9	G2SF MA9173 6.500 09/20/53	03/01/2025	PAY DOWN		24,211	24,211	24,421	24,404	0	(193)	0	(193)	0	24,211	0	0	0	254	09/20/2053	1.A		
..36208C-7L-5	GNSF 447399 7.500 07/15/27	03/01/2025	PAY DOWN		181	181	183	181	0	0	0	0	0	181	0	0	0	2	07/15/2027	1.A		
1019999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Guaranteed (Exempt from RBC)					24,392	24,392	24,604	24,585	0	(193)	0	(193)	0	24,392	0	0	0	256	XXX	XXX		
..31294M-DH-8	FGCI E02817 3.000 01/01/26	03/01/2025	PAY DOWN		978	978	952	975	0	3	0	3	0	978	0	0	0	5	01/01/2026	1.A		
..3128ME-3F-6	FGCI G15998 2.500 01/01/32	03/01/2025	PAY DOWN		1,879	1,879	1,883	1,881	0	(2)	0	(2)	0	1,879	0	0	0	8	01/01/2032	1.A		
..3128MM-VZ-3	FGCI G18631 2.500 02/01/32	03/01/2025	PAY DOWN		3,221	3,221	3,229	3,225	0	(4)	0	(4)	0	3,221	0	0	0	14	02/01/2032	1.A		
..3128MM-WJ-8	FGCI G18648 3.500 06/01/32	03/01/2025	PAY DOWN		3,537	3,537	3,699	3,662	0	(125)	0	(125)	0	3,537	0	0	0	21	06/01/2032	1.A		
..3128MM-WS-8	FGCI G18656 3.500 08/01/32	03/01/2025	PAY DOWN		3,331	3,331	3,410	3,389	0	(58)	0	(58)	0	3,331	0	0	0	21	08/01/2032	1.A		
..3128PQ-ZH-7	FGCI J11644 4.000 02/01/25	02/01/2025	PAY DOWN		62	62	63	62	0	0	0	0	0	62	0	0	0	0	02/01/2025	1.A		
..3128PJ-JD-7	FGCI J18360 3.000 03/01/27	03/01/2025	PAY DOWN		1,602	1,602	1,657	1,612	0	(10)	0	(10)	0	1,602	0	0	0	8	03/01/2027	1.A		
..31296M-PA-1	FGLMC A13117 5.000 09/01/33	03/01/2025	PAY DOWN		475	475	470	471	0	4	0	4	0	475	0	0	0	4	09/01/2033	1.A		
..31296Q-4R-8	FGLMC A16232 5.500 11/01/33	03/01/2025	PAY DOWN		2,121	2,121	2,164	2,152	0	(31)	0	(31)	0	2,121	0	0	0	12	11/01/2033	1.A		
..3128K6-7K-0	FGLMC A46298 5.500 07/01/35	03/01/2025	PAY DOWN		1,045	1,045	1,056	1,054	0	(9)	0	(9)	0	1,045	0	0	0	10	07/01/2035	1.A		
..3128KV-MN-2	FGLMC A64865 6.000 08/01/37	03/01/2025	PAY DOWN		312	312	315	315	0	(2)	0	(2)	0	312	0	0	0	3	08/01/2037	1.A		
..312940-2H-1	FGLMC A92576 4.500 07/01/40	03/01/2025	PAY DOWN		284	284	292	292	0	(7)	0	(7)	0	284	0	0	0	2	07/01/2040	1.A		
..312941-NJ-2	FGLMC A93093 4.500 07/01/40	03/01/2025	PAY DOWN		967	967	1,017	1,013	0	(47)	0	(47)	0	967	0	0	0	7	07/01/2040	1.A		
..312942-NF-8	FGLMC A93990 4.000 09/01/40	03/01/2025	PAY DOWN		505	505	523	522	0	(16)	0	(16)	0	505	0	0	0	3	09/01/2040	1.A		
..31292H-VU-5	FGLMC C01527 5.500 04/01/33	03/01/2025	PAY DOWN		574	574	584	582	0	(7)	0	(7)	0	574	0	0	0	6	04/01/2033	1.A		
..31292L-KQ-7	FGLMC C03903 3.500 04/01/42	03/01/2025	PAY DOWN		1,679	1,679	1,680	1,680	0	(1)	0	(1)	0	1,679	0	0	0	7	04/01/2042	1.A		
..31292L-L6-0	FGLMC C03949 3.500 05/01/42	03/01/2025	PAY DOWN		899	899	922	916	0	(18)	0	(18)	0	899	0	0	0	5	05/01/2042	1.A		
..3128M4-4Q-3	FGLMC G03231 5.500 08/01/37	03/01/2025	PAY DOWN		943	943	929	931	0	13	0	13	0	943	0	0	0	5	08/01/2037	1.A		
..3128M5-UZ-1	FGLMC G03900 5.500 02/01/38	03/01/2025	PAY DOWN		234	234	233	233	0	1	0	1	0	234	0	0	0	2	02/01/2038	1.A		
..3128M7-XB-7	FGLMC G05774 5.000 01/01/40	03/01/2025	PAY DOWN		751	751	795	795	0	(43)	0	(43)	0	751	0	0	0	6	01/01/2040	1.A		
..3128M8-AZ-7	FGLMC G06024 4.500 08/01/40	03/01/2025	PAY DOWN		529	529	559	554	0	(24)	0	(24)	0	529	0	0	0	4	08/01/2040	1.A		
..3128MJ-RJ-6	FGLMC G08505 3.000 09/01/42	03/01/2025	PAY DOWN		3,063	3,063	3,216	3,185	0	(122)	0	(122)	0	3,063	0	0	0	15	09/01/2042	1.A		
..3128MJ-U3-2	FGLMC G08601 4.000 08/01/44	03/01/2025	PAY DOWN		538	538	575	575	0	(37)	0	(37)	0	538	0	0	0	3	08/01/2044	1.A		
..3128MJ-X4-7	FGLMC G08698 3.500 03/01/46	03/01/2025	PAY DOWN		690	690	721	721	0	(30)	0	(30)	0	690	0	0	0	4	03/01/2046	1.A		
..3128MJ-X5-4	FGLMC G08699 4.000 03/01/46	03/01/2025	PAY DOWN		711	711	763	763	0	(52)	0	(52)	0	711	0	0	0	5	03/01/2046	1.A		
..3128MJ-YM-6	FGLMC G08715 3.000 08/01/46	03/01/2025	PAY DOWN		682	682	709	709	0	(27)	0	(27)	0	682	0	0	0	3	08/01/2046	1.A		
..3128MJ-ZH-6	FGLMC G08743 4.000 01/01/47	03/01/2025	PAY DOWN		682	682	718	718	0	(36)	0	(36)	0	682	0	0	0	4	01/01/2047	1.A		

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STATEMENT AS OF MARCH 31, 2025 OF THE 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	Change In Book/Adjusted Carrying Value					15	16	17	18	19	20	21
									10	11	12	13	14							
CUSIP Ident-ification	Description	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 Book/ Adjusted Carrying Value (10 + 11 - 12)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
..3128MJ-ZM-5	FGLMC G08747 3.000 02/01/47	03/01/2025	PAY DOWN		2,161	2,161	2,135	2,135	0	26	0	26	0	2,161	0	0	0	11	02/01/2047	1.A
..31335A-QK-7	FGLMC G60458 3.500 01/01/44	03/01/2025	PAY DOWN		1,664	1,664	1,751	1,746	0	(82)	0	(82)	0	1,664	0	0	0	9	01/01/2044	1.A
..31335A-UL-0	FGLMC G60587 4.000 02/01/46	03/01/2025	PAY DOWN		101	101	108	108	0	(7)	0	(7)	0	101	0	0	0	1	02/01/2046	1.A
..3132GL-VB-7	FGLMC Q05410 3.500 01/01/42	03/01/2025	PAY DOWN		506	506	506	506	0	0	0	0	0	506	0	0	0	3	01/01/2042	1.A
..3132J2-5H-2	FGTW K90848 3.000 07/01/33	03/01/2025	PAY DOWN		1,904	1,904	1,971	1,948	0	(44)	0	(44)	0	1,904	0	0	0	10	07/01/2033	1.A
..31394V-LV-0	FN 05123C PG PAC FIX	03/01/2025	PAY DOWN		5,434	5,434	5,271	5,365	0	69	0	69	0	5,434	0	0	0	37	01/25/2033	1.A
..31418V-CY-4	FNCL AD8186 3.500 08/01/25	03/01/2025	PAY DOWN		509	509	528	511	0	(1)	0	(1)	0	509	0	0	0	3	09/01/2025	1.A
..31419E-LD-9	FNCL AE4179 3.500 10/01/25	03/01/2025	PAY DOWN		170	170	176	170	0	0	0	0	0	170	0	0	0	1	10/01/2025	1.A
..3138EO-SF-7	FNCL AJ7717 3.000 12/01/26	03/01/2025	PAY DOWN		1,301	1,301	1,341	1,307	0	(6)	0	(6)	0	1,301	0	0	0	7	12/01/2026	1.A
..3138MK-2E-5	FNCL A04372 2.500 11/01/27	03/01/2025	PAY DOWN		1,208	1,208	1,206	1,207	0	1	0	1	0	1,208	0	0	0	5	11/01/2027	1.A
..3138W0-L6-4	FNCL AR3048 2.500 01/01/28	03/01/2025	PAY DOWN		1,563	1,563	1,550	1,559	0	3	0	3	0	1,563	0	0	0	7	01/01/2028	1.A
..3138WY-FK-8	FNCL AT9169 2.500 07/01/28	03/01/2025	PAY DOWN		3,533	3,533	3,512	3,526	0	7	0	7	0	3,533	0	0	0	15	07/01/2028	1.A
..3140J7-T5-4	FNCL BM3271 3.000 12/01/32	03/01/2025	PAY DOWN		6,237	6,237	6,340	6,302	0	(65)	0	(65)	0	6,237	0	0	0	31	12/01/2032	1.A
..314007-2P-1	FNCL CA0781 3.000 11/01/32	03/01/2025	PAY DOWN		5,586	5,586	5,697	5,657	0	(71)	0	(71)	0	5,586	0	0	0	27	11/01/2032	1.A
..31371H-B6-4	FNCL 252161 6.000 12/01/28	03/01/2025	PAY DOWN		524	524	518	522	0	2	0	2	0	524	0	0	0	5	12/01/2028	1.A
..31371M-CG-0	FNCL 255771 6.000 07/01/35	03/01/2025	PAY DOWN		462	462	471	469	0	(7)	0	(7)	0	462	0	0	0	5	07/01/2035	1.A
..31400Y-3Q-7	FNCL 702007 5.000 05/01/33	03/01/2025	PAY DOWN		874	874	895	890	0	(16)	0	(16)	0	874	0	0	0	10	05/01/2033	1.A
..31406U-HH-4	FNCL 820232 5.500 06/01/35	03/01/2025	PAY DOWN		233	233	236	236	0	(3)	0	(3)	0	233	0	0	0	2	06/01/2035	1.A
..31409Y-LL-9	FNCL 882687 6.000 06/01/36	03/01/2025	PAY DOWN		195	195	194	194	0	1	0	1	0	195	0	0	0	2	06/01/2036	1.A
..31410U-KA-9	FNCL 897689 5.500 06/01/37	03/01/2025	PAY DOWN		492	492	481	482	0	10	0	10	0	492	0	0	0	5	06/01/2037	1.A
..31413R-2P-0	FNCL 953582 6.000 12/01/37	03/01/2025	PAY DOWN		115	115	122	121	0	(6)	0	(6)	0	115	0	0	0	1	12/01/2037	1.A
..31416J-ZM-6	FNCL AA1647 5.000 02/01/39	03/01/2025	PAY DOWN		136	136	141	140	0	(4)	0	(4)	0	136	0	0	0	1	02/01/2039	1.A
..31416M-5A-8	FNCL AA4440 5.000 03/01/39	03/01/2025	PAY DOWN		385	385	399	398	0	(13)	0	(13)	0	385	0	0	0	3	03/01/2039	1.A
..31417C-JL-0	FNCL AB5666 3.500 07/01/42	03/01/2025	PAY DOWN		300	300	306	306	0	(6)	0	(6)	0	300	0	0	0	2	07/01/2042	1.A
..31417C-KM-6	FNCL AB5699 3.500 07/01/42	03/01/2025	PAY DOWN		1,574	1,574	1,569	1,569	0	5	0	5	0	1,574	0	0	0	12	07/01/2042	1.A
..31417C-VS-1	FNCL AB6024 3.500 08/01/42	03/01/2025	PAY DOWN		526	526	550	549	0	(23)	0	(23)	0	526	0	0	0	3	08/01/2042	1.A
..31417D-TR-4	FNCL AB6859 3.500 11/01/42	03/01/2025	PAY DOWN		963	963	1,001	999	0	(36)	0	(36)	0	963	0	0	0	7	11/01/2042	1.A
..31417E-NZ-1	FNCL AB7575 3.000 01/01/43	03/01/2025	PAY DOWN		1,148	1,148	1,144	1,144	0	4	0	4	0	1,148	0	0	0	7	01/01/2043	1.A
..31417E-N9-8	FNCL AB7615 3.500 01/01/43	03/01/2025	PAY DOWN		2,617	2,617	2,735	2,716	0	(99)	0	(99)	0	2,617	0	0	0	15	01/01/2043	1.A
..31417F-3E-6	FNCL AB8896 3.000 04/01/43	03/01/2025	PAY DOWN		1,047	1,047	1,017	1,021	0	26	0	26	0	1,047	0	0	0	5	04/01/2043	1.A
..31417G-5A-0	FNCL AB9840 3.500 07/01/43	03/01/2025	PAY DOWN		795	795	833	831	0	(37)	0	(37)	0	795	0	0	0	5	07/01/2043	1.A
..31417H-B5-2	FNCL AB9859 4.000 07/01/43	03/01/2025	PAY DOWN		754	754	787	783	0	(29)	0	(29)	0	754	0	0	0	4	07/01/2043	1.A
..31419J-SV-1	FNCL AE7731 4.500 11/01/40	03/01/2025	PAY DOWN		944	944	1,006	1,002	0	(58)	0	(58)	0	944	0	0	0	6	11/01/2040	1.A
..3138AN-CW-1	FNCL A18184 4.000 08/01/41	03/01/2025	PAY DOWN		2,055	2,055	2,155	2,137	0	(81)	0	(81)	0	2,055	0	0	0	10	08/01/2041	1.A
..3138AN-YU-1	FNCL A18822 4.500 08/01/41	03/01/2025	PAY DOWN		190	190	201	201	0	(11)	0	(11)	0	190	0	0	0	1	08/01/2041	1.A
..3138AV-TB-1	FNCL AJ4145 4.000 11/01/41	03/01/2025	PAY DOWN		409	409	427	425	0	(16)	0	(16)	0	409	0	0	0	3	11/01/2041	1.A
..3138AW-RQ-8	FNCL AJ4994 4.500 11/01/41	03/01/2025	PAY DOWN		509	509	548	545	0	(36)	0	(36)	0	509	0	0	0	4	11/01/2041	1.A
..3138EG-HX-5	FNCL AL0245 4.000 04/01/41	03/01/2025	PAY DOWN		757	757	780	778	0	(21)	0	(21)	0	757	0	0	0	4	04/01/2041	1.A
..3138EH-US-9	FNCL AL1492 4.000 03/01/42	03/01/2025	PAY DOWN		2,210	2,210	2,312	2,303	0	(93)	0	(93)	0	2,210	0	0	0	10	03/01/2042	1.A
..3138EJ-RA-8	FNCL AL2280 4.500 09/01/42	03/01/2025	PAY DOWN		3,235	3,235	3,445	3,438	0	(202)	0	(202)	0	3,235	0	0	0	27	09/01/2042	1.A
..3138EJ-3Y-2	FNCL AL2614 3.500 11/01/42	03/01/2025	PAY DOWN		803	803	831	829	0	(26)	0	(26)	0	803	0	0	0	5	11/01/2042	1.A
..3138EK-FB-6	FNCL AL2861 3.500 12/01/42	03/01/2025	PAY DOWN		1,444	1,444	1,484	1,479	0	(35)	0	(35)	0	1,444	0	0	0	9	12/01/2042	1.A
..3138EK-HJ-7	FNCL AL2932 4.000 07/01/42	03/01/2025	PAY DOWN		184	184	194	194	0	(9)	0	(9)	0	184	0	0	0	1	07/01/2042	1.A
..3138EK-VH-9	FNCL AL3424 4.000 01/01/43	03/01/2025	PAY DOWN		1,200	1,200	1,260	1,255	0	(55)	0	(55)	0	1,200	0	0	0	6	01/01/2043	1.A
..3138ET-2J-4	FNCL AL8876 3.000 10/01/44	03/01/2025	PAY DOWN		1,651	1,651	1,718	1,715	0	(63)	0	(63)	0	1,651	0	0	0	7	10/01/2044	1.A
..3138LR-AE-2	FNCL A00904 4.000 04/01/42	03/01/2025	PAY DOWN		504	504	518	516	0	(12)	0	(12)	0	504	0	0	0	3	04/01/2042	1.A
..3138LU-SX-4	FNCL A04133 3.500 06/01/42	03/01/2025	PAY DOWN		1,943	1,943	1,941	1,941	0	2	0	2	0	1,943	0	0	0	12	06/01/2042	1.A
..3138W4-CR-0	FNCL AP6379 3.000 02/01/43	03/01/2025	PAY DOWN		3,985	3,985	4,125	4,083	0	(98)	0	(98)	0	3,985	0	0	0	22	02/01/2043	1.A
..3138W6-SU-1	FNCL AR8630 3.000 04/01/43	03/01/2025	PAY DOWN		520	520	535	534	0	(15)	0	(15)	0	520	0	0	0	3	04/01/2043	1.A
..3138W9-HH-3	FNCL AS0244 4.000 08/01/43	03/01/2025	PAY DOWN		90	90	93	93	0	(3)	0	(3)	0	90	0	0	0	1	08/01/2043	1.A
..3138W9-KR-0	FNCL AS0303 3.000 08/01/43	03/01/2025	PAY DOWN		1,017	1,017	1,014	1,014	0	3	0	3	0	1,017	0	0	0	5	08/01/2043	1.A
..3138W9-MT-4	FNCL AS0369 4.500 09/01/43	03/01/2025	PAY DOWN		155	155	166	165	0	(11)	0	(11)	0	155	0	0	0	1	09/01/2043	1.A
..3138WA-FR-3	FNCL AS1075 3.000 11/01/43	03/01/2025	PAY DOWN		840	840	865	862	0	(22)	0	(22)	0	840	0	0	0	4	11/01/2043	1.A
..3138WA-WT-0	FNCL AS1557 4.000 01/01/44	03/01/2025	PAY DOWN		1,531	1,531	1,627	1,626	0	(95)	0	(95)	0	1,531	0	0	0	12	01/01/2044	1.A

STATEMENT AS OF MARCH 31, 2025 OF THE 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	Change In Book/Adjusted Carrying Value				15	16	17	18	19	20	21	
									10	11	12	13								14
CUSIP Identification	Description	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 Book/ Adjusted Carrying Value (10 + 11 - 12)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
..3138WB-LK-9	FNCL AS2385 4.00 05/01/44	03/01/2025	PAY DOWN		238	238	252	251	0	(13)	0	(13)	0	238	0	0	0	2	05/01/2044	1.A
..3138WE-ZJ-1	FNCL AS5244 3.50 06/01/45	03/01/2025	PAY DOWN		2,269	2,269	2,351	2,346	0	(77)	0	(77)	0	2,269	0	0	0	12	06/01/2045	1.A
..3138WG-DN-1	FNCL AS6408 3.50 01/01/46	03/01/2025	PAY DOWN		429	429	429	454	0	(25)	0	(25)	0	429	0	0	0	2	01/01/2046	1.A
..3138WJ-PC-6	FNCL AS8518 3.00 12/01/46	03/01/2025	PAY DOWN		1,336	1,336	1,329	1,329	0	7	0	7	0	1,336	0	0	0	8	12/01/2046	1.A
..3138WM-KY-6	FNCL AT0310 3.50 03/01/43	03/01/2025	PAY DOWN		808	808	860	860	0	(41)	0	(41)	0	808	0	0	0	5	03/01/2043	1.A
..3138WZ-TZ-5	FNCL AU0567 3.50 08/01/43	03/01/2025	PAY DOWN		567	567	562	562	0	5	0	5	0	567	0	0	0	3	08/01/2043	1.A
..3138X0-Y2-8	FNCL AU1628 3.00 07/01/43	03/01/2025	PAY DOWN		1,293	1,293	1,287	1,271	0	22	0	22	0	1,293	0	0	0	6	07/01/2043	1.A
..3138X1-3A-2	FNCL AU2592 3.50 08/01/43	03/01/2025	PAY DOWN		1,427	1,427	1,478	1,475	0	(48)	0	(48)	0	1,427	0	0	0	9	08/01/2043	1.A
..3138X3-XM-9	FNCL AU4283 3.50 09/01/43	03/01/2025	PAY DOWN		2,071	2,071	2,079	2,077	0	(6)	0	(6)	0	2,071	0	0	0	11	09/01/2043	1.A
..3138Y6-3S-1	FNCL AX5308 3.50 01/01/42	03/01/2025	PAY DOWN		453	453	476	475	0	(22)	0	(22)	0	453	0	0	0	3	01/01/2042	1.A
..3138YH-U6-5	FNCL AY4204 3.50 05/01/45	03/01/2025	PAY DOWN		830	830	857	857	0	(27)	0	(27)	0	830	0	0	0	5	05/01/2045	1.A
..3140FP-C9-8	FNCL BE3695 3.50 06/01/47	03/01/2025	PAY DOWN		2,794	2,794	2,779	2,780	0	14	0	14	0	2,794	0	0	0	18	06/01/2047	1.A
..3140HB-FK-9	FNCL BJ9169 4.00 05/01/48	03/01/2025	PAY DOWN		1,476	1,476	1,504	1,504	0	(28)	0	(28)	0	1,476	0	0	0	10	05/01/2048	1.A
..3140HB-GZ-5	FNCL BJ9215 4.00 06/01/48	03/01/2025	PAY DOWN		590	590	600	600	0	(11)	0	(11)	0	590	0	0	0	5	06/01/2048	1.A
..3140J8-HZ-9	FNCL BM3847 4.00 05/01/48	03/01/2025	PAY DOWN		2,872	2,872	2,941	2,940	0	(68)	0	(68)	0	2,872	0	0	0	13	05/01/2048	1.A
..3140JQ-LQ-6	FNCL BND334 4.00 12/01/48	03/01/2025	PAY DOWN		3,885	3,885	4,040	4,040	0	(156)	0	(156)	0	3,885	0	0	0	22	12/01/2048	1.A
..3140K5-MD-6	FNCL B09355 3.00 03/01/50	03/01/2025	PAY DOWN		3,182	3,182	3,349	3,349	0	(167)	0	(167)	0	3,182	0	0	0	16	03/01/2050	1.A
..3140KL-LG-5	FNCL BQ1226 2.00 09/01/50	03/01/2025	PAY DOWN		5,472	5,472	5,662	5,622	0	(150)	0	(150)	0	5,472	0	0	0	18	09/01/2050	1.A
..3140L6-IM-2	FNCL BR7851 2.50 05/01/51	03/01/2025	PAY DOWN		8,861	8,861	9,188	9,134	0	(273)	0	(273)	0	8,861	0	0	0	40	05/01/2051	1.A
..3140M1-CG-7	FNCL BU0070 2.50 10/01/51	03/01/2025	PAY DOWN		8,197	8,197	7,222	7,287	0	909	0	909	0	8,197	0	0	0	38	10/01/2051	1.A
..3140MH-SH-3	FNCL BV4119 2.50 03/01/52	03/01/2025	PAY DOWN		5,983	5,983	5,168	5,224	0	759	0	759	0	5,983	0	0	0	24	03/01/2052	1.A
..3140QF-A2-5	FNCL CA7224 2.00 10/01/50	03/01/2025	PAY DOWN		1,466	1,466	1,520	1,510	0	(44)	0	(44)	0	1,466	0	0	0	5	10/01/2050	1.A
..3140QG-D4-6	FNCL CA8222 1.50 12/01/50	03/01/2025	PAY DOWN		4,892	4,892	4,932	4,924	0	(32)	0	(32)	0	4,892	0	0	0	10	12/01/2050	1.A
..3140QK-SA-7	FNCL CB0512 2.50 05/01/51	03/01/2025	PAY DOWN		3,086	3,086	3,219	3,200	0	(114)	0	(114)	0	3,086	0	0	0	11	05/01/2051	1.A
..3140QN-B4-3	FNCL CB2758 3.00 02/01/52	03/01/2025	PAY DOWN		9,562	9,562	8,452	8,535	0	1,028	0	1,028	0	9,562	0	0	0	55	02/01/2052	1.A
..3140QO-D3-6	FNCL CB4621 5.00 09/01/52	03/01/2025	PAY DOWN		12,886	12,886	12,886	12,886	0	0	0	0	0	12,886	0	0	0	89	09/01/2052	1.A
..3140QU-U6-1	FNCL CB8704 6.00 06/01/54	03/01/2025	PAY DOWN		7,042	7,042	7,138	7,129	0	(96)	0	(96)	0	7,042	0	0	0	43	06/01/2054	1.A
..3140X4-Y8-3	FNCL FIM1634 3.50 06/01/49	03/01/2025	PAY DOWN		1,288	1,288	1,329	1,329	0	(40)	0	(40)	0	1,288	0	0	0	8	06/01/2049	1.A
..3140X6-2N-0	FNCL FIM3480 2.50 06/01/50	03/01/2025	PAY DOWN		8,883	8,883	9,267	9,222	0	(338)	0	(338)	0	8,883	0	0	0	36	06/01/2050	1.A
..3140XA-Z4-7	FNCL FIM7062 2.50 01/01/51	03/01/2025	PAY DOWN		6,229	6,229	6,473	6,458	0	(229)	0	(229)	0	6,229	0	0	0	25	01/01/2051	1.A
..3140XB-C7-3	FNCL FIM7293 2.50 05/01/51	03/01/2025	PAY DOWN		4,322	4,322	4,493	4,469	0	(146)	0	(146)	0	4,322	0	0	0	17	05/01/2051	1.A
..3140XC-NE-4	FNCL FIM8488 2.50 07/01/51	03/01/2025	PAY DOWN		6,654	6,654	6,818	6,801	0	(147)	0	(147)	0	6,654	0	0	0	29	07/01/2051	1.A
..3140XD-CJ-3	FNCL FIM9072 2.00 10/01/51	03/01/2025	PAY DOWN		6,690	6,690	6,653	6,657	0	33	0	33	0	6,690	0	0	0	18	10/01/2051	1.A
..3140XF-GD-7	FNCL FSO195 2.50 01/01/52	03/01/2025	PAY DOWN		6,687	6,687	6,734	6,728	0	(41)	0	(41)	0	6,687	0	0	0	25	01/01/2052	1.A
..3140XJ-NC-4	FNCL FSS054 5.50 10/01/52	03/01/2025	PAY DOWN		11,144	11,144	11,018	11,029	0	116	0	116	0	11,144	0	0	0	102	10/01/2052	1.A
..3140XL-QP-1	FNCL FSS161 3.00 05/01/52	03/01/2025	PAY DOWN		11,246	11,246	10,025	10,122	0	1,125	0	1,125	0	11,246	0	0	0	67	05/01/2052	1.A
..3140XM-WZ-7	FNCL FSS163 5.00 04/01/53	03/01/2025	PAY DOWN		26,226	26,226	25,210	25,248	0	978	0	978	0	26,226	0	0	0	268	04/01/2053	1.A
..3141BC-OB-3	FNCL MA3149 4.00 10/01/47	03/01/2025	PAY DOWN		779	779	809	809	0	(30)	0	(30)	0	779	0	0	0	5	10/01/2047	1.A
..3141BD-OB-8	FNCL MA4078 2.50 07/01/50	03/01/2025	PAY DOWN		13,649	13,649	11,619	11,736	0	1,913	0	1,913	0	13,649	0	0	0	55	07/01/2050	1.A
..3133AD-SX-5	FNCL QB6834 2.50 12/01/50	03/01/2025	PAY DOWN		4,381	4,381	4,542	4,524	0	(143)	0	(143)	0	4,381	0	0	0	16	12/01/2050	1.A
..3133KJ-ZF-8	FNCL RA3474 3.00 09/01/50	03/01/2025	PAY DOWN		21,709	21,709	19,128	19,305	0	2,405	0	2,405	0	21,709	0	0	0	129	09/01/2050	1.A
..3133KK-7C-7	FNCL RA4491 1.50 02/01/51	03/01/2025	PAY DOWN		4,350	4,350	4,383	4,377	0	(27)	0	(27)	0	4,350	0	0	0	10	02/01/2051	1.A
..3132DI-A6-0	FNCL SD8129 2.50 02/01/51	03/01/2025	PAY DOWN		13,930	13,930	11,968	12,082	0	1,848	0	1,848	0	13,930	0	0	0	57	02/01/2051	1.A
..3132DI-CT-8	FNCL SD8182 2.00 12/01/51	03/01/2025	PAY DOWN		3,530	3,530	3,541	3,540	0	(10)	0	(10)	0	3,530	0	0	0	12	12/01/2051	1.A
..3132DI-C3-5	FNCL SD8190 3.00 01/01/52	03/01/2025	PAY DOWN		8,124	8,124	8,328	8,305	0	(181)	0	(181)	0	8,124	0	0	0	40	01/01/2052	1.A
..3138WJ-QE-1	FNCT AS8552 3.00 12/01/36	03/01/2025	PAY DOWN		5,268	5,268	5,389	5,358	0	(90)	0	(90)	0	5,268	0	0	0	31	12/01/2036	1.A
..31371K-A4-3	FNK2 253927 6.50 07/01/31	03/01/2025	PAY DOWN		89	89	89	89	0	0	0	0	0	89	0	0	0	1	07/01/2031	1.A
1039999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)					362,632	362,632	356,260	349,208	0	6,297	0	6,297	0	362,632	0	0	0	2,038	XXX	XXX
..03464H-AA-3	ACMT 225 A1 FIX	03/01/2025	PAY DOWN		6,768	6,768	6,600	6,651	0	117	0	117	0	6,768	0	0	0	50	05/25/2067	1.A FE
..33852B-AN-5	FSMT 192 B1 VARI	03/01/2025	PAY DOWN		3,221	3,221	2,866	2,866	0	355	0	355	0	3,221	0	0	0	21	12/25/2049	1.A
..36168M-AA-1	GCAT 22NM3 A1 SR FIX	03/01/2025	PAY DOWN		12,045	12,045	11,814	11,938	0	107	0	107	0	12,045	0	0	0	84	04/25/2067	1.A
..36170H-AA-8	GCAT 22NM4 A1 SR FIX	03/01/2025	PAY DOWN		3,820	3,820	3,820	3,820	0	0	0	0	0	3,820	0	0	0	31	08/25/2067	1.A

E05.2

STATEMENT AS OF MARCH 31, 2025 OF THE 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	Change In Book/Adjusted Carrying Value					15	16	17	18	19	20	21	
									10	11	12	13	14								
CUSIP Identification	Description	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	Other Than Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (10 + 11 - 12)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	
..36261M-AB-5	GSMB 21PJ1 A2 FIX	03/01/2025	PAY DOWN		2,618	2,618	2,727	2,721	0	(103)	0	(103)	0	2,618	0	0	0	13	06/25/2051	1.A	
..36263N-AB-1	GSMB 22PJ1 A2 FIX	03/01/2025	PAY DOWN		5,229	5,229	5,137	5,146	0	83	0	83	0	5,229	0	0	0	21	05/28/2052	1.A	
..46648R-AY-7	JPMT 181 B1 SUB SEQ VARI	03/01/2025	PAY DOWN		5,065	5,065	4,420	4,493	0	573	0	573	0	5,065	0	0	0	29	06/25/2048	1.A	
..46654A-AC-3	JPMT 2110 A3 FIX	03/01/2025	PAY DOWN		5,874	5,874	5,985	5,976	0	(102)	0	(102)	0	5,874	0	0	0	24	12/25/2051	1.A	
..46592T-AC-7	JPMT 218 A3 FIX	03/01/2025	PAY DOWN		5,227	5,227	5,295	5,289	0	(61)	0	(61)	0	5,227	0	0	0	22	12/25/2051	1.A	
..64831U-AA-2	NRMLT 22NQM4 A1 SR FIX	03/01/2025	PAY DOWN		5,528	5,528	5,510	5,511	0	17	0	17	0	5,528	0	0	0	46	06/25/2062	1.A	
..75409T-AA-3	RATE 21J3 A1 FIX	03/01/2025	PAY DOWN		6,701	6,701	6,769	6,761	0	(59)	0	(59)	0	6,701	0	0	0	33	10/25/2051	1.A	
..91743P-EA-9	UTAH HOUSING CORPORATION	03/21/2025	PAY DOWN		5,050	5,050	5,251	5,228	0	(178)	0	(178)	0	5,050	0	0	0	25	02/21/2052	1.B FE	
1059999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency Residential Mortgage-Backed Securities (Unaffiliated)					67,146	67,146	66,217	66,400	0	749	0	749	0	67,146	0	0	0	399	XXX	XXX	
..618937-AA-4	MSAIC 2024-1A A	03/20/2025	PAY DOWN		17,635	17,635	17,588	17,593	0	42	0	42	0	17,635	0	0	0	167	09/20/2049	1.D FE	
1119999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Other Financial Asset-Backed Securities - Self-Liquidating (Unaffiliated)					17,635	17,635	17,588	17,593	0	42	0	42	0	17,635	0	0	0	167	XXX	XXX	
..12530M-AA-3	CF HIPPOLYTA ISSUER LLC SERIES 2020-1	03/15/2025	PAY DOWN		0	0	0	0	0	0	0	0	0	0	0	0	0	0	07/15/2060	1.E FE	
..82867C-AC-9	SRL 2024-1A A	03/17/2025	PAY DOWN		500	500	500	500	0	0	0	0	0	500	0	0	0	5	05/17/2054	1.C FE	
..872480-AA-6	TIF FUNDING 11 LLC	03/20/2025	PAY DOWN		10,000	10,000	8,667	9,123	0	877	0	877	0	10,000	0	0	0	35	08/20/2045	1.F FE	
..97064Y-AA-2	WILLIS ENGINE STRUCTURED TRUST VII SERIE	03/15/2025	PAY DOWN		9,720	9,720	9,608	9,669	0	51	0	51	0	9,720	0	0	0	91	10/15/2048	1.F FE	
1519999999. Subtotal - Asset-Backed Securities - Non-Financial Asset-Backed Securities - Practical Expedient - Lease-Backed Securities - Practical Expedient (Unaffiliated)					20,220	20,220	18,775	19,292	0	928	0	928	0	20,220	0	0	0	131	XXX	XXX	
1899999999. Total - Asset-Backed Securities (Unaffiliated)					492,025	492,025	483,444	477,078	0	7,823	0	7,823	0	492,025	0	0	0	2,991	XXX	XXX	
1899999999. Total - Asset-Backed Securities (Affiliated)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
1909999997. Total - Asset-Backed Securities - Part 4					492,025	492,025	483,444	477,078	0	7,823	0	7,823	0	492,025	0	0	0	2,991	XXX	XXX	
1909999998. Total - Asset-Backed Securities - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1909999999. Total - Asset-Backed Securities					492,025	492,025	483,444	477,078	0	7,823	0	7,823	0	492,025	0	0	0	2,991	XXX	XXX	
2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities					3,744,149	3,742,279	3,997,368	3,733,665	0	5,728	0	5,728	0	3,746,518	0	(2,369)	(2,369)	68,340	XXX	XXX	
4509999997. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
4509999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999997. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999999. Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999 - Totals					3,744,149	XXX	3,997,368	3,733,665	0	5,728	0	5,728	0	3,746,518	0	(2,369)	(2,369)	68,340	XXX	XXX	

E05.3

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

STATEMENT AS OF MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Restricted Asset Code	4 Date Acquired	5 Stated Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
0489999999. Total - Issuer Credit Obligations (Unaffiliated)						0	0	0
0499999999. Total - Issuer Credit Obligations (Affiliated)						0	0	0
0509999999. Total - Issuer Credit Obligations						0	0	0
31607A-70-3	FIDELITY INV MMKT GOVT-INST		03/31/2025	4.270		1,338,023	5,871	6,762
8309999999. Subtotal - All Other Money Market Mutual Funds						1,338,023	5,871	6,762
8589999999. Total Cash Equivalents (Unaffiliated)						1,338,023	5,871	6,762
8599999999. Total Cash Equivalents (Affiliated)						0	0	0
8609999999 - Total Cash Equivalents						1,338,023	5,871	6,762



SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association
of Rhode Island

Designate the type of health care
providers reported on this page:
Physicians, including surgeons and
osteopaths

**SUPPLEMENT A TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES**

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 No. of Claims		6 Amount Reported	7 No. of Claims	
1. AlabamaAL								
2. AlaskaAK								
3. ArizonaAZ								
4. ArkansasAR								
5. CaliforniaCA								
6. ColoradoCO								
7. ConnecticutCT								
8. DelawareDE								
9. District of ColumbiaDC								
10. FloridaFL								
11. GeorgiaGA								
12. HawaiiHI								
13. IdahoID								
14. IllinoisIL								
15. IndianaIN								
16. IowaIA								
17. KansasKS								
18. KentuckyKY								
19. LouisianaLA								
20. MaineME								
21. MarylandMD								
22. MassachusettsMA								
23. MichiganMI								
24. MinnesotaMN								
25. MississippiMS								
26. MissouriMO								
27. MontanaMT								
28. NebraskaNE								
29. NevadaNV								
30. New HampshireNH								
31. New JerseyNJ								
32. New MexicoNM								
33. New YorkNY								
34. North CarolinaNC								
35. North DakotaND								
36. OhioOH								
37. OklahomaOK								
38. OregonOR								
39. PennsylvaniaPA								
40. Rhode IslandRI	346,193	287,821	162,820	2	828,408	4,795,609	11	4,935,295
41. South CarolinaSC								
42. South DakotaSD								
43. TennesseeTN								
44. TexasTX								
45. UtahUT								
46. VermontVT								
47. VirginiaVA								
48. WashingtonWA								
49. West VirginiaWV								
50. WisconsinWI								
51. WyomingWY								
52. American SamoaAS								
53. GuamGU								
54. Puerto RicoPR								
55. U.S. Virgin IslandsVI								
56. Northern Mariana IslandsMP								
57. CanadaCAN								
58. Aggregate Other AliensOT	0	0	0	0	0	0	0	0
59. Totals	346,193	287,821	162,820	2	828,408	4,795,609	11	4,935,295
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 through 58003 plus 58998)(Line 58 above)	0	0	0	0	0	0	0	0



SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2025 OF THE Medical Malpractice Joint Underwriting Association
of Rhode Island

Designate the type of health care
providers reported on this page:
Hospitals

**SUPPLEMENT A TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES**

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 No. of Claims		6 Amount Reported	7 No. of Claims	
1. AlabamaAL								
2. AlaskaAK								
3. ArizonaAZ								
4. ArkansasAR								
5. CaliforniaCA								
6. ColoradoCO								
7. ConnecticutCT								
8. DelawareDE								
9. District of ColumbiaDC								
10. FloridaFL								
11. GeorgiaGA								
12. HawaiiHI								
13. IdahoID								
14. IllinoisIL								
15. IndianaIN								
16. IowaIA								
17. KansasKS								
18. KentuckyKY								
19. LouisianaLA								
20. MaineME								
21. MarylandMD								
22. MassachusettsMA								
23. MichiganMI								
24. MinnesotaMN								
25. MississippiMS								
26. MissouriMO								
27. MontanaMT								
28. NebraskaNE								
29. NevadaNV								
30. New HampshireNH								
31. New JerseyNJ								
32. New MexicoNM								
33. New YorkNY								
34. North CarolinaNC								
35. North DakotaND								
36. OhioOH								
37. OklahomaOK								
38. OregonOR								
39. PennsylvaniaPA								
40. Rhode IslandRI	217,963	120,687	695,000	2	190,813	4,035,000	20	3,089,319
41. South CarolinaSC								
42. South DakotaSD								
43. TennesseeTN								
44. TexasTX								
45. UtahUT								
46. VermontVT								
47. VirginiaVA								
48. WashingtonWA								
49. West VirginiaWV								
50. WisconsinWI								
51. WyomingWY								
52. American SamoaAS								
53. GuamGU								
54. Puerto RicoPR								
55. U.S. Virgin IslandsVI								
56. Northern Mariana IslandsMP								
57. CanadaCAN								
58. Aggregate Other AliensOT	0	0	0	0	0	0	0	0
59. Totals	217,963	120,687	695,000	2	190,813	4,035,000	20	3,089,319
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 through 58003 plus 58998)(Line 58 above)	0	0	0	0	0	0	0	0