



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF MARCH 31, 2026

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 51-0140354

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

Main Administrative Office One Turks Head Place Providence, RI, US 02903 410-980-1100

Mail Address One Turks Head Place Providence, RI, US 02903

Primary Location of Books and Records One Turks Head Place Providence, RI, US 02903 410-980-1100

Internet Website Address http://rhodeislandjua.com/

Statutory Statement Contact Susan Mertes 410-980-1100 susan.mertes@bbrown.com 401-369-8241

OFFICERS

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

OTHER

DIRECTORS OR TRUSTEES

James Pascalides DPM Earl Cottam Jr. Adam Robitaille Don Baldini Barbara M Cavicchio DDS Stacy Paterno Jennifer Morrison Virginia Burke Eric Payntor Michael Walder Joe Torti Matthew Gendron # Beth Vollucci #

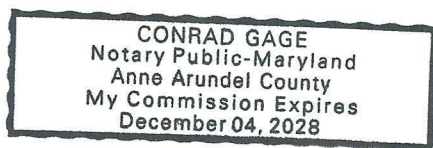
State of Rhode Island Maryland Anne Arundel County of Providence

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 27th day of April 2026

- 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.....





PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

# QUARTERLY STATEMENT

AS OF MARCH 31, 2026

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 51-0140354

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  
(Street and Number) Providence, RI, US 02903 410-980-1100  
(City or Town, State, Country and Zip Code) (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  
(Street and Number) Providence, RI, US 02903 410-980-1100  
(City or Town, State, Country and Zip Code) (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>James Pascalides DPM</u>	<u>Earl Cottam Jr.</u>	<u>Adam Robitaille</u>
<u>Don Baldini</u>	<u>Barbara M Cavicchio DDS</u>	<u>Stacy Palerno</u>
<u>Jennifer Morrison</u>	<u>Virginia Burke</u>	<u>Eric Paynter</u>
<u>Michael Walder</u>	<u>Joe Torti</u>	<u>Matthew Gendron #</u>
<u>Beth Vollucci #</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 29 day of April, 2026  
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.....



STATEMENT AS OF MARCH 31, 2026 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 .....	89,285,714		89,285,714	88,483,852
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 (\$ .....5,228,688 ), cash equivalents (\$ ..... 409,087 ) and short-term investments (\$ ..... ) .....	5,637,775		5,637,775	526,258
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....			0	0
8. Other invested assets .....	91,107,002		91,107,002	91,480,000
9. Receivables for securities .....	228,571		228,571	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) .....	186,259,062	0	186,259,062	180,490,110
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	1,367,025		1,367,025	1,271,997
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	502,011		502,011	283,667
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	412,924		412,924	212,953
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 ....			0	0
18.2 Net deferred tax asset .....			0	0
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....			0	0
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other than invested assets .....	1,892	0	1,892	2,717
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	188,542,914	0	188,542,914	182,261,444
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27)	188,542,914	0	188,542,914	182,261,444
<b>DETAILS OF WRITE-INS</b>				
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 .....	1,892		1,892	2,717
2502. ....			0	0
2503. ....			0	0
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)	1,892	0	1,892	2,717

STATEMENT AS OF MARCH 31, 2026 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 \$ 2,297,745 )	18,729,626	17,169,230
2. Reinsurance payable on paid losses and loss adjustment expenses	0	0
3. Loss adjustment expenses	8,200,823	6,639,109
4. Commissions payable, contingent commissions and other similar charges	164,843	1,330
5. Other expenses (excluding taxes, licenses and fees)	185,162	286,595
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	138,951	18,853
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	777,884	307,619
7.2 Net deferred tax liability	2,107,937	2,432,039
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 \$ 0 for medical loss ratio rebate per the Public Health Service Act)	2,604,184	2,197,141
10. Advance premium	14,220	81,812
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	460,514	460,514
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	46,819	1,443
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	33,430,963	29,595,685
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	33,430,963	29,595,685
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)	155,111,951	152,665,759
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)	155,111,951	152,665,759
38. Totals (Page 2, Line 28, Col. 3)	188,542,914	182,261,444
<b>DETAILS OF WRITE-INS</b>		
2501. Losses Payable	46,819	1,443
2502.		
2503.		
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)	46,819	1,443
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
<b>UNDERWRITING INCOME</b>			
1. Premiums earned:			
1.1 Direct (written \$ 6,947,544 )	6,540,500	520,969	2,974,657
1.2 Assumed (written \$ )			
1.3 Ceded (written \$ )			
1.4 Net (written \$ 6,947,544 )	6,540,500	520,969	2,974,657
<b>DEDUCTIONS:</b>			
2. Losses incurred (current accident year \$ 2,297,745 ):			
2.1 Direct	1,873,729	1,013,643	2,977,799
2.2 Assumed			
2.3 Ceded			
2.4 Net	1,873,729	1,013,643	2,977,799
3. Loss adjustment expenses incurred	1,669,856	599,081	232,233
4. Other underwriting expenses incurred	718,573	366,591	1,773,708
5. Aggregate write-ins for underwriting deductions	0	0	0
6. Total underwriting deductions (Lines 2 through 5)	4,262,158	1,979,315	4,983,740
7. Net income of protected cells			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	2,278,342	(1,458,346)	(2,009,083)
<b>INVESTMENT INCOME</b>			
9. Net investment income earned	1,649,871	1,502,779	6,281,084
10. Net realized capital gains (losses) less capital gains tax of \$ 116,885	439,712	(1,871)	23,650
11. Net investment gain (loss) (Lines 9 + 10)	2,089,583	1,500,908	6,304,734
<b>OTHER INCOME</b>			
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	4,514	3,980	15,743
14. Aggregate write-ins for miscellaneous income	0	0	(592,200)
15. Total other income (Lines 12 through 14)	4,514	3,980	(576,457)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	4,372,439	46,542	3,719,194
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)	4,372,439	46,542	3,719,194
19. Federal and foreign income taxes incurred	853,380	(37,742)	623,523
20. Net income (Line 18 minus Line 19)(to Line 22)	3,519,059	84,284	3,095,671
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
21. Surplus as regards policyholders, December 31 prior year	152,665,759	146,822,512	146,822,510
22. Net income (from Line 20)	3,519,059	84,284	3,095,671
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$ (293,363)	(1,103,605)	(650,868)	2,806,913
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax	30,738	(23,716)	(59,335)
27. Change in nonadmitted assets			
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)	2,446,192	(590,300)	5,843,249
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	155,111,951	146,232,212	152,665,759
<b>DETAILS OF WRITE-INS</b>			
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	(592,200)
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	(592,200)
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, 2026 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
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	6,461,636	744,363	1,910,405
2. Net investment income .....	1,533,329	1,527,574	6,029,620
3. Miscellaneous income .....	4,514	15,158	(568,967)
4. Total (Lines 1 to 3) .....	7,999,479	2,287,095	7,371,058
5. Benefit and loss related payments .....	313,333	877,821	2,841,793
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 .....	644,537	488,743	2,147,144
8. Dividends paid to policyholders .....	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	500,000	0	130,000
10. Total (Lines 5 through 9) .....	1,457,870	1,366,564	5,118,937
11. Net cash from operations (Line 4 minus Line 10) .....	6,541,609	920,531	2,252,121
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	1,447,022	3,744,155	13,228,865
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	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	1,447,022	3,744,155	13,228,865
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	2,694,744	4,125,140	16,193,238
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 .....	228,571	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	2,923,315	4,125,140	16,193,238
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) .....	(1,476,293)	(380,985)	(2,964,373)
<b>Cash from Financing and Miscellaneous Sources</b>			
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) .....	46,201	6,214	0
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	46,201	6,214	0
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	5,111,517	545,760	(712,252)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	526,258	1,238,510	1,238,510
19.2 End of period (Line 18 plus Line 19.1) .....	5,637,775	1,784,270	526,258

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

--	--	--	--

# NOTES TO FINANCIAL STATEMENTS

## Note 1 – Summary of Significant Accounting Policies and Going Concern

### A. Accounting Practices

Medical Malpractice Joint Underwriting Association of Rhode Island ("the MMJUA") is a joint underwriting association created by the state of Rhode Island. The MMJUA was originally created in accordance with RI Gen. Law 42-35-3 by the adoption of Regulation 230-RICR-20-10-1 (formerly Insurance Regulation 21) by the Department of Business Regulation (the "Department") effective June 16, 1975. Subsequently, legislation was enacted which authorized the Department to promulgate regulations relating to medical malpractice insurance and validated Regulation 230-RICR-20-10-1. It was the intent of the Department that the MMJUA provides a continuing stable facility for medical malpractice insurance. Under the original plan of operation (approved June 25, 1975) and as amended and approved by the department on November 10, 2003, the MMJUA was created to provide medical malpractice insurance for physicians, hospitals and other health care providers, on a self-supporting basis.

The MMJUA is authorized to issue medical malpractice policies on a "claims made" or "occurrence" basis with limits not to exceed \$1,000,000 for each medical incident under one policy and in the aggregate of \$3,000,000 under one policy in any one year. The MMJUA is also authorized to underwrite incidental coverages for any health care provider that is also covered by the MMJUA's medical malpractice, with limits of \$1,000,000 per incident and \$1,000,000 aggregate under a one-year policy. Additionally, the MMJUA is authorized to provide Commercial General Liability coverage to the health care providers with limits of \$1,000,000 per incident and \$2,000,000 aggregate under a one year policy. All policies are on an annual basis and shall be subject to the Group Retrospective Rating Plan and Stabilization Reserve Fund as authorized by Regulation 230-RICR-20-10-1.

The Group Retrospective Rating Plan and stabilization reserve fund are described under Note 24 in the Annual Notes to the Financial Statements.

	SSAP #	F/S Page	F/S Line #	3/31/2026	12/31/2025
<b>NET INCOME</b>					
(1) The Company state basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 3,519,059	\$ 3,095,671
(2) State Prescribed Practice that are an increase/(decrease) from NAIC SAP				\$ -	\$ -
(3) State Permitted Practice that are an increase/(decrease) from NAIC SAP				\$ -	\$ -
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 3,519,059	\$ 3,095,671
<b>SURPLUS</b>					
(5) The Company state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 155,111,951	\$ 152,665,759
(6) State Prescribed Practice that are an increase/(decrease) from NAIC SAP				\$ -	\$ -
(7) State Permitted Practice that are an increase/(decrease) from NAIC SAP				\$ -	\$ -
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 155,111,951	\$ 152,665,759

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

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

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

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

### C. Accounting Policy

The Company uses the following accounting policies:

(1) Basis for Short-Term Investments

No change.

(2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method

Bonds generally are stated at amortized cost, except for bonds that are rated by the NAIC as a class 3 - 6 which are reported at the lower of amortized cost or fair market value. Amortization is calculated using the scientific constant yield to worst method.

(3) Basis for Common Stocks

No change.

(4) Basis for Preferred Stocks

No change.

(5) Basis for Mortgage Loans

No change.

(6) Basis for Loan-Backed Securities and Adjustment Methodology

Investment grade loan-backed securities are stated at amortized value. The retrospective adjustment method is used to value all loan-backed securities. Non-investment grade loan-backed securities are stated at the lower of amortized value or fair value.

# NOTES TO FINANCIAL STATEMENTS

---

(7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities

No change.

(8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities

No change.

(9) Accounting Policies for Derivatives

No change.

(10) Anticipated Investment Income Used in Premium Deficiency Calculation

No change.

(11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses

No change.

(12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period

No change.

(13) Method Used to Estimate Pharmaceutical Rebate Receivables

No change.

D. Going Concern

Management has evaluated the Company's ability to continue as a going concern and concluded that no conditions or events raise substantial doubt about the Company's ability to meet its obligations as they become due for a period of at least one year from the date the financial statements are issued.

## **Note 2 – Accounting Changes and Corrections of Errors**

No significant changes.

## **Note 3 – Business Combinations and Goodwill**

Not applicable.

## **Note 4 – Discontinued Operations**

Not applicable.

## **Note 5 – Investments**

No significant changes.

## **Note 6 – Joint Ventures, Partnerships and Limited Liability Companies**

Not applicable.

## **Note 7 – Investment Income**

A. The bases, by category of investment income, for excluding (nonadmitting) and investment income due and accrued:

The Company does not admit investment income due and accrued if amounts are over 90 days past due (180 days for mortgage loans).

B. The total amount excluded:

Not applicable.

## **Note 8 – Derivative Instruments**

Not applicable.

## **Note 9 – Income Taxes**

No significant changes.

## **Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**

Not applicable.

## **Note 11 – Debt**

Not applicable.

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

Not applicable.

# NOTES TO FINANCIAL STATEMENTS

**Note 13 – Capital and Surplus, Shareholder’s Dividend Restrictions and Quasi-Reorganizations**

Not applicable.

**Note 14 – Liabilities, Contingencies and Assessments**

No significant changes.

**Note 15 – Leases**

Not applicable.

**Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk**

Not applicable.

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

Not applicable.

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

Not applicable.

**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	Types of Authority Granted	Total Direct Produced By
Brown & Brown RS Insurance Services, LLC	95-3679538	YES	Medical Malpractice, General Liability	C, CA, R, B, P, U	\$6,947,544
Total	XXX	XXX	XXX	XXX	\$6,947,544

**Note 20 – Fair Value Measurements**

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

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

Level 1- Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Association has the ability to access.

Level 2 – Inputs to the valuation methodology include:

- Quoted process for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability; or
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

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

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

(3) Policies when Transfers Between Levels are Recognized

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

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

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

(5) Fair Value Disclosures

Not applicable.

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

Not applicable.

# NOTES TO FINANCIAL STATEMENTS

C. Fair Value Level

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 85,670,143	\$ 89,285,714	\$ -	\$ 85,670,143	\$ -	\$ -	\$ -
Cash, cash equivalents and short-term investments	\$ 5,637,775	\$ 5,637,775	\$ 5,637,775	\$ -	\$ -	\$ -	\$ -
Other Invested Assets	\$ 88,932,073	\$ 91,107,002	\$ 25,171,523	\$ 63,760,550	\$ -	\$ -	\$ -

D. Not Practicable to Estimate Fair Value

Not applicable.

E. NAV Practical Expedient Investments

Not applicable.

**Note 21 – Other Items**

A. Unusual or Infrequent Items

In March 2026, the Company issued a single tail policy within the medical professional claims-made line of business, which resulted in an increase in direct premium written and earned of \$6,057,000 and corresponding increases in direct incurred but not reported loss reserves of \$1,805,000 and other underwriting expenses incurred of \$278,000.

B. Troubled Debt Restructuring Debtors

Not applicable.

C. Other Disclosures

No significant changes.

D. Business Interruption Insurance Recoveries

Not applicable.

E. State Transferable and Non-transferable Tax Credits

Not applicable.

F. Subprime-Mortgage-Related Risk Exposure

Not applicable.

G. Insurance-Linked Securities (ILS) Contracts

Not applicable.

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

Not applicable.

**Note 22 – Events Subsequent**

Subsequent events have been considered through May 15, 2026 for the statutory statement issued on May 15, 2026.

**Note 23 – Reinsurance**

No significant changes.

**Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination**

No significant changes.

**Note 25 – Change in Incurred Losses and Loss Adjustment Expenses**

A. Change in Incurred Losses and Loss Adjustment Expenses

There was minimal unfavorable development of \$633,000 attributable to insured events of prior years due to higher-than-expected development on a few existing claims, primarily related to accident years 2018 and 2024 along with one newly reported claim that occurred in 2023.

B. Information about Significant Changes in Methodologies and Assumptions

There have been no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

# NOTES TO FINANCIAL STATEMENTS

---

**Note 26 – Intercompany Pooling Arrangements**

Not applicable.

**Note 27 – Structured Settlements**

No significant changes.

**Note 28 – Health Care Receivables**

Not applicable.

**Note 29 – Participating Policies**

Not applicable.

**Note 30 – Premium Deficiency Reserves**

Not applicable.

**Note 31 – High Deductibles**

Not applicable.

**Note 32 – Discounting of Liabilities for Unpaid Losses or Unpaid LAE**

Not applicable.

**Note 33 – Asbestos/Environmental Reserves**

Not applicable.

**Note 34 – Subscriber Savings Accounts**

Not applicable.

**Note 35 – Multiple Peril Crop Insurance**

Not applicable.

**Note 36 – Financial Guaranty Insurance**

Not applicable.

STATEMENT AS OF MARCH 31, 2026 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 [ ] No [ X ] 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. .... 12/31/2024
- 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). .... 02/03/2026
- 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, 2026 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: ..... \$ ..... 0
- 13.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [ ] No [ X ]
- 13.2 If yes, please complete the following:
- |   | 1<br>Prior Year-End<br>Book/Adjusted<br>Carrying Value | 2<br>Current Quarter<br>Book/Adjusted<br>Carrying Value |
|---|--|---|
| 13.21 Bonds .....   | \$ ..... 0   | \$ .....  |
| 13.22 Preferred Stock .....   | \$ ..... 0   | \$ .....  |
| 13.23 Common Stock .....  | \$ ..... 0   | \$ .....  |
| 13.24 Short-Term Investments .....  | \$ .....   | \$ .....  |
| 13.25 Mortgage Loans on Real Estate .....   | \$ ..... 0   | \$ .....  |
| 13.26 All Other .....   | \$ ..... 0   | \$ .....  |
| 13.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 13.21 to 13.26) ..... | \$ ..... 0   | \$ ..... 0  |
| 13.28 Total Investment in Parent included in Lines 13.21 to 13.26 above .....                       | \$ .....   | \$ .....  |
- 14.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [ ] No [ X ]
- 14.2 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.  
 .....
15. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 15.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... \$ ..... 0
- 15.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... \$ ..... 0
- 15.3 Total payable for securities lending reported on the liability page. .... \$ ..... 0

STATEMENT AS OF MARCH 31, 2026 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island  
**GENERAL INTERROGATORIES**

16. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? ..... Yes [ X ] No [ ]
- 16.1 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 .....

- 16.2 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)

- 16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter? ..... Yes [ ] No [ X ]
- 16.4 If yes, give full information relating thereto:

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

- 16.5 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.....

16.5097 For those firms/individuals listed in the table for Question 16.5, 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 [ ] N/A [ ]

16.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 16.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [ X ] No [ ] N/A [ ]

- 16.6 For those firms or individuals listed in the table for 16.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

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

- 17.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? ..... Yes [ X ] No [ ]
- 17.2 If no, list exceptions:

.....

18. 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 ]

STATEMENT AS OF MARCH 31, 2026 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island  
**GENERAL INTERROGATORIES**

19. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:
- a. The security was either:
    - i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
    - ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
  - b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
  - c. The NAIC Designation and NAIC Designation Category were 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, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
  - d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.
- Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? ..... Yes [  ] No [  ]
20. 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 [  ]

STATEMENT AS OF MARCH 31, 2026 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 [ ] N/A [ X ]  
 If yes, attach an explanation.  
 .....

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? ..... Yes [ ] No [ X ]  
 If yes, attach an explanation.  
 .....

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? ..... Yes [ ] No [ X ]

3.2 If yes, give full and complete information thereto.  
 .....

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? ..... Yes [ ] No [ X ]

4.2 If yes, complete the following schedule:

			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
<b>NONE</b>						

STATEMENT AS OF MARCH 31, 2026 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	6,947,544	770,598	313,333	877,820	18,729,626	8,881,609
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	6,947,544	770,598	313,333	877,820	18,729,626	8,881,609
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 (DSL) - Reporting entities<br>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<br>(other than their state of domicile - see DSLI)..... | 0 | 6. N - None of the above - Not allowed to write business in the state.....  | 56 |

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

---

**NONE**

**SCHEDULE Y**

**PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
<b>NONE</b>															

Asterisk															
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**NONE**

**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 .....	261,452	351,754	134.5	217.8
11.2 Medical professional liability - claims-made .....	6,211,156	1,583,964	25.5	312.4
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 .....	67,892	(61,989)	(91.3)	(5.0)
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	6,540,500	1,873,729	28.6	194.6
<b>DETAILS OF WRITE-INS</b>				
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, 2026 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 .....	643,446	643,446	374,851
11.2	Medical professional liability - claims-made .....	6,184,387	6,184,387	189,305
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 .....	119,711	119,711	206,442
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	6,947,544	6,947,544	770,598
<b>DETAILS OF WRITE-INS</b>				
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, 2026 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)	2026 Loss and LAE Payments on Claims Reported as of Prior Year-End	2026 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2026 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. 2023 + Prior .....	8,308	6,323	14,631	396	0	396	7,959	55	6,337	14,351	47	69	116
2. 2024 .....	1,499	3,359	4,858	16	0	16	1,933	0	3,426	5,359	450	67	517
3. Subtotals 2024 + Prior .....	9,807	9,682	19,489	412	0	412	9,892	55	9,763	19,710	497	136	633
4. 2025 .....	319	4,001	4,320	10	0	10	302	0	4,008	4,310	(7)	7	0
5. Subtotals 2025 + Prior .....	10,126	13,683	23,809	422	0	422	10,194	55	13,771	24,020	490	143	633
6. 2026 .....	XXX	XXX	XXX	XXX	0	0	XXX	10	2,900	2,910	XXX	XXX	XXX
7. Totals .....	10,126	13,683	23,809	422	0	422	10,194	65	16,671	26,930	490	143	633
8. Prior year-end surplus as regards policyholders	152,666										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. 4.8	2. 1.0	3. 2.7
													Col. 13, Line 7 As a % of Col. 1 Line 8
													4. 0.4

STATEMENT AS OF MARCH 31, 2026 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.

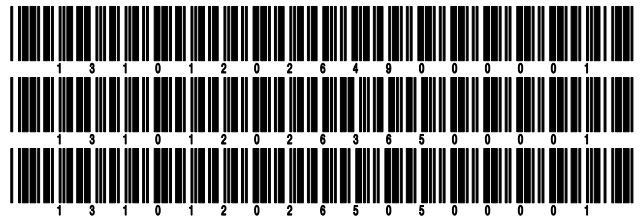
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? .....	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement? .....	YES
3. Will the Medicare Part D Coverage Supplement be filed 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
<b>AUGUST FILING</b>	
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. Not applicable.
3. Not applicable.
4. Not applicable.

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 .....	91,480,000	84,995,497
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		
2.2 Additional investment made after acquisition .....		
3. Capitalized deferred interest and other .....	1,012,562	2,851,769
4. Accrual of discount .....	11,409	79,680
5. Unrealized valuation increase/(decrease) .....	(1,396,969)	3,553,054
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) .....	91,107,002	91,480,000
12. Deduct total nonadmitted amounts .....		
13. Statement value at end of current period (Line 11 minus Line 12)	91,107,002	91,480,000

**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 .....	88,483,852	88,269,482
2. Cost of bonds and stocks acquired .....	2,246,926	13,628,397
3. Accrual of discount .....	43,325	228,590
4. Unrealized valuation increase/(decrease) .....	0	0
5. Total gain (loss) on disposals .....	(8,147)	(256,991)
6. Deduct consideration for bonds and stocks disposed of .....	1,447,022	13,228,865
7. Deduct amortization of premium .....	33,220	156,761
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. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	89,285,714	88,483,852
12. Deduct total nonadmitted amounts .....	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	89,285,714	88,483,852

STATEMENT AS OF MARCH 31, 2026 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
<b>ISSUER CREDIT OBLIGATIONS (ICO)</b>								
1. NAIC 1 (a) .....	29,754,244	747,663	247,802	(6,749)	30,247,356	0	0	29,754,244
2. NAIC 2 (a) .....	19,833,095	995,670	0	7,189	20,835,954	0	0	19,833,095
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	49,587,339	1,743,333	247,802	440	51,083,310	0	0	49,587,339
<b>ASSET-BACKED SECURITIES (ABS)</b>								
8. NAIC 1 .....	38,896,516	503,594	1,207,367	9,661	38,202,404	0	0	38,896,516
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	38,896,516	503,594	1,207,367	9,661	38,202,404	0	0	38,896,516
<b>PREFERRED STOCK</b>								
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	88,483,855	2,246,927	1,455,169	10,101	89,285,714	0	0	88,483,855

(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

S102

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 .....	316,664	845,713
2. Cost of cash equivalents acquired .....	409,087	1,313,006
3. Accrual of discount .....	0	3,658
4. Unrealized valuation increase/(decrease) .....	0	0
5. Total gain (loss) on disposals .....	0	0
6. Deduct consideration received on disposals .....	316,664	1,845,713
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) .....	409,087	316,664
11. Deduct total nonadmitted amounts .....	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	409,087	316,664

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, 2026 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

**SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stocks 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
05401A-BF-7	AVOLON HOLDINGS FUNDING LIMITED	02/18/2026	WELLS FARGO SECURITIES LLC		495,670	500,000	0	2.B FE
05571A-BF-1	BPCE SA	01/06/2026	BANK AMERICA		500,000	500,000	0	2.A FE
278058-DY-5	EATON CORPORATION	03/13/2026	GOLDMAN SACHS		492,765	500,000	625	1.G FE
46647P-EW-2	JPMORGAN CHASE & CO.	03/30/2026	CITADEL SECURITIES		254,898	250,000	2,560	1.E FE
0089999999	Subtotal - issuer credit obligations - corporate bonds (unaffiliated)				1,743,333	1,750,000	3,185	XXX
0489999999	Total - issuer credit obligations (unaffiliated)				1,743,333	1,750,000	3,185	XXX
0499999999	Total - issuer credit obligations (affiliated)				0	0	0	XXX
0509999997	Total - issuer credit obligations - Part 3				1,743,333	1,750,000	3,185	XXX
0509999998	Total - issuer credit obligations - Part 5				XXX	XXX	XXX	XXX
0509999999	Total - issuer credit obligations				1,743,333	1,750,000	3,185	XXX
38381S-ST-5	GN 2658 AJ SEQ FIX	03/11/2026	NOMURA SECURITIES DOMESTIC		503,594	500,000	2,014	1.A
1029999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - agency commercial mortgage-backed securities - guaranteed (exempt from RBC)				503,594	500,000	2,014	XXX
1889999999	Total - asset-backed securities (unaffiliated)				503,594	500,000	2,014	XXX
1899999999	Total - asset-backed securities (affiliated)				0	0	0	XXX
1909999997	Total - asset-backed securities - Part 3				503,594	500,000	2,014	XXX
1909999998	Total - asset-backed securities - Part 5				XXX	XXX	XXX	XXX
1909999999	Total - asset-backed securities				503,594	500,000	2,014	XXX
2009999999	Total - issuer credit obligations and asset-backed securities				2,246,927	2,250,000	5,199	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				2,246,927	XXX	5,199	XXX

STATEMENT AS OF MARCH 31, 2026 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

**SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stocks 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	
..603827-YM-2	MINNEAPOLIS-ST. PAUL METROPOLITAN AIRPOR	01/01/2026	MATURITY		175,000	175,000	205,835	175,000	0	0	0	0	0	175,000	0	0	0	4,375	01/01/2026	1.D FE	
0059999999. Subtotal - issuer credit obligations - municipal bonds - special revenue					175,000	175,000	205,835	175,000	0	0	0	0	0	175,000	0	0	0	4,375	XXX	XXX	
..314353-AA-1	FEDERAL EXPRESS CORPORATION 2020-1 PASS	02/20/2026	PAY DOWN		6,684	6,684	6,684	6,684	0	0	0	0	0	6,684	0	0	0	0	02/20/2035	1.D FE	
..90783Y-AA-9	UNION PACIFIC RAILROAD CO 2007-3 PASS TH	03/09/2026	PAY DOWN		59,585	59,585	59,585	59,585	0	0	0	0	0	59,585	0	0	0	4,406	01/02/2031	1.C FE	
..909318-AA-5	UNITED AIRLINES INC 2018-1AA PASS THROU	03/01/2026	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)					72,802	72,802	72,802	72,802	0	0	0	0	0	72,802	0	0	0	0	4,583	XXX	XXX
0489999999. Total - issuer credit obligations (unaffiliated)					247,802	247,802	278,637	247,802	0	0	0	0	0	247,802	0	0	0	0	8,958	XXX	XXX
0499999999. Total - issuer credit obligations (affiliated)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
0509999997. Total - issuer credit obligations - Part 4					247,802	247,802	278,637	247,802	0	0	0	0	0	247,802	0	0	0	0	8,958	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					247,802	247,802	278,637	247,802	0	0	0	0	0	247,802	0	0	0	0	8,958	XXX	XXX
..36179Y-FN-9	GSF MA9173 6.500 09/20/53	03/01/2026	PAY DOWN		21,833	21,833	22,022	22,007	0	(174)	0	(174)	0	21,833	0	0	0	227	09/20/2053	1.A	
..36208C-7L-5	GNISF 447399 7.500 PD DOWN	01/01/2026	PAY DOWN		90	90	92	90	0	0	0	0	0	90	0	0	0	1	07/15/2027	1.A	
1019999999. Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - agency residential mortgage-backed securities - guaranteed (exempt from RBC)					21,923	21,923	22,114	22,097	0	(174)	0	(174)	0	21,923	0	0	0	0	228	XXX	XXX
..3129AM-DW-8	FGLI E02817 3.000 01/01/26	01/01/2026	PAY DOWN		131	131	128	131	0	0	0	0	0	131	0	0	0	0	01/01/2026	1.A	
..3128ME-3F-6	FGLI G15998 2.500 01/01/32	03/01/2026	PAY DOWN		1,634	1,634	1,637	1,635	0	(1)	0	(1)	0	1,634	0	0	0	7	01/01/2032	1.A	
..3128MM-VZ-3	FGLI G18631 2.500 02/01/32	03/01/2026	PAY DOWN		2,946	2,946	2,954	2,949	0	(3)	0	(3)	0	2,946	0	0	0	12	02/01/2032	1.A	
..3128MM-WJ-8	FGLI G18648 3.500 06/01/32	03/01/2026	PAY DOWN		2,594	2,594	2,713	2,674	0	(80)	0	(80)	0	2,594	0	0	0	15	06/01/2032	1.A	
..3128MM-WS-8	FGLI G18656 3.500 08/01/32	03/01/2026	PAY DOWN		2,388	2,388	2,445	2,425	0	(36)	0	(36)	0	2,388	0	0	0	14	08/01/2032	1.A	
..3128PY-JD-7	FGLI J18360 3.000 03/01/27	03/01/2026	PAY DOWN		1,124	1,124	1,128	1,128	0	(4)	0	(4)	0	1,124	0	0	0	6	03/01/2027	1.A	
..31296M-PA-1	FGLMC A13117 5.000 09/01/33	03/01/2026	PAY DOWN		502	502	496	498	0	3	0	3	0	502	0	0	0	4	09/01/2033	1.A	
..31296Q-AR-8	FGLMC A16232 5.500 11/01/33	03/01/2026	PAY DOWN		383	383	391	388	0	(5)	0	(5)	0	383	0	0	0	4	11/01/2033	1.A	
..3128K6-7K-0	FGLMC A46298 5.500 07/01/35	03/01/2026	PAY DOWN		134	134	135	135	0	(1)	0	(1)	0	134	0	0	0	1	07/01/2035	1.A	
..3128KV-MN-2	FGLMC A64865 6.000 08/01/37	03/01/2026	PAY DOWN		333	333	336	335	0	(2)	0	(2)	0	333	0	0	0	3	08/01/2037	1.A	
..31294Q-ZH-1	FGLMC A92576 4.500 07/01/40	03/01/2026	PAY DOWN		234	234	241	240	0	(6)	0	(6)	0	234	0	0	0	2	07/01/2040	1.A	
..31294I-NJ-2	FGLMC A93093 4.500 07/01/40	03/01/2026	PAY DOWN		1,115	1,115	1,173	1,165	0	(51)	0	(51)	0	1,115	0	0	0	8	07/01/2040	1.A	
..31294Z-NF-8	FGLMC A93990 4.000 09/01/40	03/01/2026	PAY DOWN		320	320	331	330	0	(10)	0	(10)	0	320	0	0	0	2	09/01/2040	1.A	
..31292H-VU-5	FGLMC C01527 5.500 04/01/33	03/01/2026	PAY DOWN		598	598	609	605	0	(7)	0	(7)	0	598	0	0	0	5	04/01/2033	1.A	
..31292L-KO-7	FGLMC C03903 3.500 04/01/42	03/01/2026	PAY DOWN		760	760	760	760	0	0	0	0	0	760	0	0	0	4	04/01/2042	1.A	
..31292L-L6-0	FGLMC C03949 3.500 05/01/42	03/01/2026	PAY DOWN		3,175	3,175	3,256	3,233	0	(59)	0	(59)	0	3,175	0	0	0	15	05/01/2042	1.A	
..3129M4-4Q-3	FGLMC G03231 5.500 08/01/37	03/01/2026	PAY DOWN		261	261	257	258	0	3	0	3	0	261	0	0	0	2	08/01/2037	1.A	
..3128M5-UZ-1	FGLMC G03900 5.500 02/01/38	03/01/2026	PAY DOWN		233	233	231	231	0	1	0	1	0	233	0	0	0	3	02/01/2038	1.A	
..3128M7-XB-7	FGLMC G05774 5.000 01/01/40	03/01/2026	PAY DOWN		991	991	1,052	1,045	0	(54)	0	(54)	0	991	0	0	0	8	01/01/2040	1.A	
..3128M8-AZ-7	FGLMC G06024 4.500 08/01/40	03/01/2026	PAY DOWN		520	520	549	543	0	(23)	0	(23)	0	520	0	0	0	4	08/01/2040	1.A	
..3128MJ-R3-6	FGLMC G08505 3.000 09/01/42	03/01/2026	PAY DOWN		2,938	2,938	3,085	3,049	0	(111)	0	(111)	0	2,938	0	0	0	14	09/01/2042	1.A	
..3128MJ-U3-2	FGLMC G08601 4.000 08/01/44	03/01/2026	PAY DOWN		489	489	523	521	0	(32)	0	(32)	0	489	0	0	0	3	08/01/2044	1.A	
..3128MJ-Y4-7	FGLMC G08698 3.500 03/01/46	03/01/2026	PAY DOWN		597	597	624	623	0	(25)	0	(25)	0	597	0	0	0	3	03/01/2046	1.A	
..3128MJ-Y5-4	FGLMC G08699 4.000 03/01/46	03/01/2026	PAY DOWN		596	596	640	639	0	(43)	0	(43)	0	596	0	0	0	3	03/01/2046	1.A	
..3128MJ-YM-6	FGLMC G08715 3.000 08/01/46	03/01/2026	PAY DOWN		739	739	769	767	0	(28)	0	(28)	0	739	0	0	0	4	08/01/2046	1.A	
..3128MJ-ZH-6	FGLMC G08743 4.000 01/01/47	03/01/2026	PAY DOWN		901	901	949	949	0	(47)	0	(47)	0	901	0	0	0	7	01/01/2047	1.A	
..3128MJ-ZM-5	FGLMC G08747 3.000 02/01/47	03/01/2026	PAY DOWN		1,922	1,922	1,899	1,900	0	22	0	22	0	1,922	0	0	0	9	02/01/2047	1.A	
..31335A-QK-7	FGLMC G60458 3.500 01/01/44	03/01/2026	PAY DOWN		1,375	1,375	1,447	1,440	0	(65)	0	(65)	0	1,375	0	0	0	8	01/01/2044	1.A	
..31335A-LJ-0	FGLMC G60587 4.000 02/01/46	03/01/2026	PAY DOWN		331	331	354	354	0	(23)	0	(23)	0	331	0	0	0	3	02/01/2046	1.A	
..3132GL-VB-7	FGLMC Q05410 3.500 01/01/42	03/01/2026	PAY DOWN		522	522	522	522	0	0	0	0	0	522	0	0	0	3	01/01/2042	1.A	
..3132J2-5H-2	FGTW K90848 3.000 07/01/33	03/01/2026	PAY DOWN		2,422	2,422	2,515	2,471	0	(48)	0	(48)	0	2,422	0	0	0	12	07/01/2033	1.A	
..31394V-LV-0	FN 05123C PG PAC FIX	03/01/2026	PAY DOWN		2,312	2,312	2,243	2,285	0	27	0	27	0	2,312	0	0	0	21	01/25/2036	1.A	
..3138E0-SF-7	FNCI AJ7717 3.000 12/01/26	03/01/2026	PAY DOWN		892	892	919	894	0	(2)	0	(2)	0	892	0	0	0	4	12/01/2026	1.A	
..3138MK-ZE-5	FNCI A04372 2.500 11/01/27	03/01/2026	PAY DOWN		1,236	1,236	1,235	1,236	0	0	0	0	0	1,236	0	0	0	6	11/01/2027	1.A	
..3138W0-L6-4	FNCI AR3048 2.500 01/01/28	03/01/2026	PAY DOWN		903	903	896	903	0	1	0	1	0	903	0	0	0	4	01/01/2028	1.A	
..3138WX-FX-8	FNCI AT9169 2.500 07/01/28	03/01/2026	PAY DOWN		2,525	2,525	2,510	2,522	0	3	0	3	0	2,525	0	0	0	10	07/01/2028	1.A	
..3140J7-T5-4	FNCI BM3271 3.000 12/01/32	03/01/2026	PAY DOWN		5,812	5,812	5,909	5,865	0	(53)	0	(53)	0	5,812	0	0	0	28	12/01/2032	1.A	

E05

STATEMENT AS OF MARCH 31, 2026 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

**SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stocks 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
..314007-2P-1	FNCL CA0781 3.000 11/01/32	03/01/2026	PAY DOWN		5,919	5,919	6,037	5,985	0	(66)	0	(66)	0	5,919	0	0	0	28	11/01/2032	1.A
..31371H-B6-4	FNCL 252161 6.000 12/01/28	03/01/2026	PAY DOWN		495	495	489	493	0	1	0	1	0	495	0	0	0	5	12/01/2028	1.A
..31371M-CG-0	FNCL 255771 6.000 07/01/35	03/01/2026	PAY DOWN		1,024	1,024	1,044	1,039	0	(15)	0	(15)	0	1,024	0	0	0	11	07/01/2035	1.A
..31400Y-3Q-7	FNCL 702007 5.000 05/01/33	03/01/2026	PAY DOWN		119	119	121	120	0	(2)	0	(2)	0	119	0	0	0	1	05/01/2033	1.A
..31406U-HH-4	FNCL 820232 5.500 06/01/35	03/01/2026	PAY DOWN		118	118	120	119	0	(2)	0	(2)	0	118	0	0	0	1	06/01/2035	1.A
..31409Y-JL-9	FNCL 820287 6.000 06/01/36	03/01/2026	PAY DOWN		208	208	207	207	0	1	0	1	0	208	0	0	0	2	06/01/2036	1.A
..31410U-KA-9	FNCL 897899 5.500 06/01/37	03/01/2026	PAY DOWN		458	458	448	450	0	8	0	8	0	458	0	0	0	4	06/01/2037	1.A
..31413R-2P-0	FNCL 953582 6.000 12/01/37	03/01/2026	PAY DOWN		125	125	132	131	0	(6)	0	(6)	0	125	0	0	0	1	12/01/2037	1.A
..31416J-ZM-6	FNCL AA1647 5.000 02/01/39	03/01/2026	PAY DOWN		144	144	149	148	0	(4)	0	(4)	0	144	0	0	0	1	02/01/2039	1.A
..31416M-5A-8	FNCL AA4440 5.000 03/01/39	03/01/2026	PAY DOWN		49	49	51	50	0	(2)	0	(2)	0	49	0	0	0	0	03/01/2039	1.A
..31417C-JL-0	FNCL AB5666 3.500 07/01/42	03/01/2026	PAY DOWN		265	265	271	270	0	(5)	0	(5)	0	265	0	0	0	2	07/01/2042	1.A
..31417C-KM-6	FNCL AB5699 3.500 07/01/42	03/01/2026	PAY DOWN		725	725	722	723	0	2	0	2	0	725	0	0	0	3	07/01/2042	1.A
..31417C-VS-1	FNCL AB6024 3.500 08/01/42	03/01/2026	PAY DOWN		755	755	790	786	0	(31)	0	(31)	0	755	0	0	0	3	08/01/2042	1.A
..31417D-TR-4	FNCL AB6859 3.500 11/01/42	03/01/2026	PAY DOWN		544	544	565	563	0	(19)	0	(19)	0	544	0	0	0	3	11/01/2042	1.A
..31417E-MZ-1	FNCL AB7575 3.000 01/01/43	03/01/2026	PAY DOWN		797	797	794	794	0	3	0	3	0	797	0	0	0	3	01/01/2043	1.A
..31417E-N9-8	FNCL AB7615 3.500 01/01/43	03/01/2026	PAY DOWN		1,229	1,229	1,285	1,273	0	(44)	0	(44)	0	1,229	0	0	0	7	01/01/2043	1.A
..31417F-3E-6	FNCL AB8896 3.000 04/01/43	03/01/2026	PAY DOWN		915	915	890	894	0	21	0	21	0	915	0	0	0	4	04/01/2043	1.A
..31417G-5A-0	FNCL AB9840 3.500 07/01/43	03/01/2026	PAY DOWN		1,354	1,354	1,419	1,413	0	(60)	0	(60)	0	1,354	0	0	0	7	07/01/2043	1.A
..31417H-B5-2	FNCL AB9959 4.000 07/01/43	03/01/2026	PAY DOWN		351	351	367	364	0	(13)	0	(13)	0	351	0	0	0	2	07/01/2043	1.A
..31419J-SV-1	FNCL AE7731 4.500 11/01/40	03/01/2026	PAY DOWN		1,085	1,085	1,157	1,148	0	(63)	0	(63)	0	1,085	0	0	0	8	11/01/2040	1.A
..3138AN-CW-1	FNCL AI1814 4.000 08/01/41	03/01/2026	PAY DOWN		1,696	1,696	1,778	1,759	0	(64)	0	(64)	0	1,696	0	0	0	11	08/01/2041	1.A
..3138AN-YU-1	FNCL AI8822 4.500 08/01/41	03/01/2026	PAY DOWN		924	924	979	974	0	(50)	0	(50)	0	924	0	0	0	7	08/01/2041	1.A
..3138AV-TB-1	FNCL AJ4145 4.000 11/01/41	03/01/2026	PAY DOWN		290	290	303	301	0	(11)	0	(11)	0	290	0	0	0	2	11/01/2041	1.A
..3138AW-RQ-8	FNCL AJ4994 4.500 11/01/41	03/01/2026	PAY DOWN		1,010	1,010	1,088	1,078	0	(68)	0	(68)	0	1,010	0	0	0	6	11/01/2041	1.A
..3138EG-HX-5	FNCL AL0245 4.000 04/01/41	03/01/2026	PAY DOWN		1,690	1,690	1,742	1,734	0	(44)	0	(44)	0	1,690	0	0	0	9	04/01/2041	1.A
..3138EH-US-9	FNCL AL1492 4.000 03/01/42	03/01/2026	PAY DOWN		3,067	3,067	3,209	3,189	0	(122)	0	(122)	0	3,067	0	0	0	18	03/01/2042	1.A
..3138EJ-RA-8	FNCL AL2280 4.500 09/01/42	03/01/2026	PAY DOWN		1,451	1,451	1,545	1,537	0	(87)	0	(87)	0	1,451	0	0	0	9	09/01/2042	1.A
..3138EJ-3Y-2	FNCL AL2614 3.500 11/01/42	03/01/2026	PAY DOWN		616	616	637	635	0	(19)	0	(19)	0	616	0	0	0	4	11/01/2042	1.A
..3138EK-FB-6	FNCL AL2861 3.500 12/01/42	03/01/2026	PAY DOWN		1,134	1,134	1,165	1,160	0	(26)	0	(26)	0	1,134	0	0	0	6	12/01/2042	1.A
..3138EK-HJ-7	FNCL AL2932 4.000 07/01/42	03/01/2026	PAY DOWN		188	188	198	197	0	(9)	0	(9)	0	188	0	0	0	1	07/01/2042	1.A
..3138EK-YW-9	FNCL AL3424 4.000 01/01/43	03/01/2026	PAY DOWN		1,030	1,030	1,081	1,075	0	(45)	0	(45)	0	1,030	0	0	0	7	01/01/2043	1.A
..3138ET-2J-4	FNCL AL8876 3.000 10/01/44	03/01/2026	PAY DOWN		1,336	1,336	1,390	1,385	0	(49)	0	(49)	0	1,336	0	0	0	6	10/01/2044	1.A
..3138LR-AE-2	FNCL A00904 4.000 04/01/42	03/01/2026	PAY DOWN		2,056	2,056	2,113	2,103	0	(47)	0	(47)	0	2,056	0	0	0	19	04/01/2042	1.A
..3138LU-SX-4	FNCL A04133 3.500 06/01/42	03/01/2026	PAY DOWN		2,163	2,163	2,161	2,161	0	2	0	2	0	2,163	0	0	0	15	06/01/2042	1.A
..3138W4-CR-0	FNCL AR6379 3.000 02/01/43	03/01/2026	PAY DOWN		4,571	4,571	4,732	4,677	0	(106)	0	(106)	0	4,571	0	0	0	23	02/01/2043	1.A
..3138W6-SU-1	FNCL AR8630 3.000 04/01/43	03/01/2026	PAY DOWN		372	372	383	382	0	(10)	0	(10)	0	372	0	0	0	2	04/01/2043	1.A
..3138W9-HH-3	FNCL AS0244 4.000 08/01/43	03/01/2026	PAY DOWN		106	106	110	110	0	(3)	0	(3)	0	106	0	0	0	1	08/01/2043	1.A
..3138W9-KR-0	FNCL AS0303 3.000 08/01/43	03/01/2026	PAY DOWN		1,137	1,137	1,133	1,134	0	3	0	3	0	1,137	0	0	0	5	08/01/2043	1.A
..3138W9-MT-4	FNCL AS0369 4.500 09/01/43	03/01/2026	PAY DOWN		149	149	160	159	0	(10)	0	(10)	0	149	0	0	0	1	09/01/2043	1.A
..3138WA-FR-3	FNCL AS1075 3.000 11/01/43	03/01/2026	PAY DOWN		657	657	677	673	0	(16)	0	(16)	0	657	0	0	0	3	11/01/2043	1.A
..3138WA-WT-0	FNCL AS1557 4.000 01/01/44	03/01/2026	PAY DOWN		1,570	1,570	1,667	1,663	0	(93)	0	(93)	0	1,570	0	0	0	12	01/01/2044	1.A
..3138WB-LK-9	FNCL AS2385 4.000 05/01/44	03/01/2026	PAY DOWN		250	250	264	263	0	(13)	0	(13)	0	250	0	0	0	2	05/01/2044	1.A
..3138WE-ZJ-1	FNCL AS5244 3.500 06/01/45	03/01/2026	PAY DOWN		750	750	777	775	0	(25)	0	(25)	0	750	0	0	0	4	06/01/2045	1.A
..3138WG-DN-1	FNCL AS6408 3.500 01/01/46	03/01/2026	PAY DOWN		470	470	497	496	0	(26)	0	(26)	0	470	0	0	0	2	01/01/2046	1.A
..3138WJ-PC-6	FNCL AS8518 3.000 12/01/46	03/01/2026	PAY DOWN		1,104	1,104	1,098	1,098	0	5	0	5	0	1,104	0	0	0	5	12/01/2046	1.A
..3138WM-KY-6	FNCL AT0310 3.500 03/01/43	03/01/2026	PAY DOWN		1,154	1,154	1,229	1,210	0	(56)	0	(56)	0	1,154	0	0	0	8	03/01/2043	1.A
..3138WZ-TZ-5	FNCL AU0567 3.500 08/01/43	03/01/2026	PAY DOWN		598	598	592	593	0	5	0	5	0	598	0	0	0	4	08/01/2043	1.A
..3138X0-Y2-8	FNCL AU1628 3.000 07/01/43	03/01/2026	PAY DOWN		958	958	939	942	0	16	0	16	0	958	0	0	0	4	07/01/2043	1.A
..3138X1-3A-2	FNCL AU2592 3.500 08/01/43	03/01/2026	PAY DOWN		1,678	1,678	1,739	1,732	0	(53)	0	(53)	0	1,678	0	0	0	10	08/01/2043	1.A
..3138X3-XM-9	FNCL AU4283 3.500 09/01/43	03/01/2026	PAY DOWN		1,340	1,340	1,345	1,344	0	(4)	0	(4)	0	1,340	0	0	0	8	09/01/2043	1.A
..3138Y6-3S-1	FNCL AX5308 3.500 01/01/42	03/01/2026	PAY DOWN		511	511	536	534	0	(24)	0	(24)	0	511	0	0	0	3	01/01/2042	1.A
..3138YH-U6-5	FNCL AY4204 3.500 05/01/45	03/01/2026	PAY DOWN		962	962	994	992	0	(30)	0	(30)	0	962	0	0	0	6	05/01/2045	1.A
..3140FP-C9-8	FNCL BE3695 3.500 06/01/47	03/01/2026	PAY DOWN		2,254	2,254	2,242	2,243	0	11	0	11	0	2,254	0	0	0	13	06/01/2047	1.A
..3140HB-FK-9	FNCL BJ9169 4.000 05/01/48	03/01/2026	PAY DOWN		1,930	1,930	1,967	1,967	0	(37)	0	(37)	0	1,930	0	0	0	12	05/01/2048	1.A

STATEMENT AS OF MARCH 31, 2026 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

**SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stocks 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	
..3140HB-GZ-5	FNCL BJ9215 4.000 06/01/48	03/01/2026	PAY DOWN		674	674	686	686	0	(12)	0	(12)	0	674	0	0	0	5	06/01/2048	1.A	
..3140J8-HZ-9	FNCL BN3847 4.000 05/01/48	03/01/2026	PAY DOWN		1,513	1,513	1,549	1,547	0	(34)	0	(34)	0	1,513	0	0	0	13	05/01/2048	1.A	
..3140JG-LQ-6	FNCL BNO334 4.000 12/01/48	03/01/2026	PAY DOWN		3,469	3,469	3,608	3,608	0	(139)	0	(139)	0	3,469	0	0	0	26	12/01/2048	1.A	
..3140K5-MD-6	FNCL BQ9355 3.000 03/01/50	03/01/2026	PAY DOWN		1,494	1,494	1,573	1,572	0	(78)	0	(78)	0	1,494	0	0	0	6	03/01/2050	1.A	
..3140KL-LG-5	FNCL BQ1226 2.000 09/01/50	03/01/2026	PAY DOWN		3,865	3,865	3,999	3,967	0	(102)	0	(102)	0	3,865	0	0	0	12	09/01/2050	1.A	
..3140L6-VM-2	FNCL BR7851 2.500 05/01/51	03/01/2026	PAY DOWN		11,648	11,648	12,078	11,996	0	(349)	0	(349)	0	11,648	0	0	0	48	05/01/2051	1.A	
..3140M1-CG-7	FNCL BU0070 2.500 10/01/51	03/01/2026	PAY DOWN		10,925	10,925	9,626	9,745	0	1,180	0	1,180	0	10,925	0	0	0	54	10/01/2051	1.A	
..3140MH-SH-3	FNCL BV4119 2.500 03/01/52	03/01/2026	PAY DOWN		5,035	5,035	4,350	4,415	0	620	0	620	0	5,035	0	0	0	19	03/01/2052	1.A	
..3140OF-A2-5	FNCL CA7224 2.000 10/01/50	03/01/2026	PAY DOWN		1,226	1,226	1,272	1,262	0	(36)	0	(36)	0	1,226	0	0	0	5	10/01/2050	1.A	
..3140OG-D4-6	FNCL CA8222 1.500 12/01/50	03/01/2026	PAY DOWN		4,460	4,460	4,497	4,488	0	(28)	0	(28)	0	4,460	0	0	0	9	12/01/2050	1.A	
..3140OK-SA-7	FNCL CB0512 2.500 05/01/51	03/01/2026	PAY DOWN		4,289	4,289	4,475	4,444	0	(154)	0	(154)	0	4,289	0	0	0	19	05/01/2051	1.A	
..3140ON-B4-3	FNCL CB2758 3.000 02/01/52	03/01/2026	PAY DOWN		11,677	11,677	10,320	10,439	0	1,238	0	1,238	0	11,677	0	0	0	55	02/01/2052	1.A	
..3140OQ-D3-6	FNCL CB4621 5.000 09/01/52	03/01/2026	PAY DOWN		7,730	7,730	7,730	7,730	0	0	0	0	0	7,730	0	0	0	59	09/01/2052	1.A	
..3140OU-U6-1	FNCL CB8704 6.000 06/01/54	03/01/2026	PAY DOWN		45,150	45,150	45,765	45,725	0	(575)	0	(575)	0	45,150	0	0	0	428	06/01/2054	1.A	
..3140X4-Y8-3	FNCL FIM1634 3.500 06/01/49	03/01/2026	PAY DOWN		1,317	1,317	1,359	1,357	0	(40)	0	(40)	0	1,317	0	0	0	8	06/01/2049	1.A	
..3140X6-ZN-0	FNCL FIM3480 2.500 06/01/50	03/01/2026	PAY DOWN		7,625	7,625	7,964	7,906	0	(281)	0	(281)	0	7,625	0	0	0	36	06/01/2050	1.A	
..3140XA-Z4-7	FNCL FIM7062 2.500 01/01/51	03/01/2026	PAY DOWN		4,907	4,907	5,099	5,082	0	(175)	0	(175)	0	4,907	0	0	0	20	01/01/2051	1.A	
..3140XB-C7-3	FNCL FIM7293 2.500 05/01/51	03/01/2026	PAY DOWN		4,668	4,668	4,852	4,821	0	(154)	0	(154)	0	4,668	0	0	0	20	05/01/2051	1.A	
..3140XC-NE-4	FNCL FIM8488 2.500 07/01/51	03/01/2026	PAY DOWN		11,469	11,469	11,715	11,715	0	(247)	0	(247)	0	11,469	0	0	0	43	07/01/2051	1.A	
..3140XD-CJ-3	FNCL FIM9072 2.000 10/01/51	03/01/2026	PAY DOWN		2,955	2,955	2,938	2,941	0	14	0	14	0	2,955	0	0	0	10	10/01/2051	1.A	
..3140XF-GD-7	FNCL FSO195 2.500 01/01/52	03/01/2026	PAY DOWN		5,250	5,250	5,287	5,291	0	(31)	0	(31)	0	5,250	0	0	0	22	01/01/2052	1.A	
..3140XJ-MC-4	FNCL FSO354 5.500 10/01/52	03/01/2026	PAY DOWN		5,788	5,788	5,723	5,730	0	59	0	59	0	5,788	0	0	0	53	10/01/2052	1.A	
..3140XK-QP-1	FNCL FS3161 3.000 05/01/52	03/01/2026	PAY DOWN		4,585	4,585	4,088	4,139	0	447	0	447	0	4,585	0	0	0	18	05/01/2052	1.A	
..3140XL-WZ-7	FNCL FSS163 5.000 04/01/53	03/01/2026	PAY DOWN		16,779	16,779	16,129	16,165	0	614	0	614	0	16,779	0	0	0	139	04/01/2053	1.A	
..31418C-QB-3	FNCL MA3149 4.000 10/01/47	03/01/2026	PAY DOWN		604	604	627	627	0	(23)	0	(23)	0	604	0	0	0	4	10/01/2047	1.A	
..31418D-Q8-8	FNCL MA4078 2.500 07/01/50	03/01/2026	PAY DOWN		13,482	13,482	11,476	11,645	0	1,837	0	1,837	0	13,482	0	0	0	56	07/01/2050	1.A	
..31418F-GY-7	FNCL MA5614 5.500 02/01/55	03/01/2026	PAY DOWN		67,230	67,230	66,876	66,927	0	303	0	303	0	67,230	0	0	0	641	02/01/2055	1.A	
..3133AD-SX-5	FNCL QB6834 2.500 12/01/50	03/01/2026	PAY DOWN		1,152	1,152	1,194	1,188	0	(36)	0	(36)	0	1,152	0	0	0	5	12/01/2050	1.A	
..3133KJ-ZF-8	FNCL RA3474 3.000 09/01/50	03/01/2026	PAY DOWN		10,008	10,008	8,818	8,930	0	1,078	0	1,078	0	10,008	0	0	0	53	09/01/2050	1.A	
..3133KK-TC-7	FNCL RA4491 1.500 02/01/51	03/01/2026	PAY DOWN		9,101	9,101	9,170	9,155	0	(54)	0	(54)	0	9,101	0	0	0	22	02/01/2051	1.A	
..3132DW-A6-0	FNCL SD8129 2.500 02/01/51	03/01/2026	PAY DOWN		13,407	13,407	11,519	11,680	0	1,728	0	1,728	0	13,407	0	0	0	57	02/01/2051	1.A	
..3132DW-CI-8	FNCL SD8182 2.000 12/01/51	03/01/2026	PAY DOWN		3,577	3,577	3,589	3,587	0	(10)	0	(10)	0	3,577	0	0	0	12	12/01/2051	1.A	
..3132DW-C3-5	FNCL SD8190 3.000 01/01/52	03/01/2026	PAY DOWN		5,433	5,433	5,570	5,553	0	(119)	0	(119)	0	5,433	0	0	0	24	01/01/2052	1.A	
..3138WJ-QE-1	FNCT AS8552 3.000 12/01/36	03/01/2026	PAY DOWN		3,270	3,270	3,345	3,321	0	(52)	0	(52)	0	3,270	0	0	0	17	12/01/2036	1.A	
..31371K-AA-3	FNK2 253927 6.500 07/01/31	03/01/2026	PAY DOWN		96	96	95	96	0	0	0	0	0	96	0	0	0	1	07/01/2031	1.A	
1039999999. Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - agency residential mortgage-backed securities - not/partially guaranteed (not exempt from RBC)					410,597	410,597	406,409	406,362	0	4,228	0	4,228	0	410,597	0	0	0	2,624	XXX	XXX	
..3137FM-QR-1	FH K093 A2 FIX	03/01/2026	PAY DOWN		3,588	3,588	3,696	3,626	0	(38)	0	(38)	0	3,588	0	0	0	19	05/25/2029	1.A	
1049999999. Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - agency commercial mortgage-backed securities - not/partially guaranteed (not exempt from RBC)					3,588	3,588	3,696	3,626	0	(38)	0	(38)	0	3,588	0	0	0	0	19	XXX	XXX
..03464H-AA-3	ACMT 225 A1 SR AVAILFUNDS FIX	03/01/2026	PAY DOWN		9,016	9,016	8,792	8,866	0	150	0	150	0	9,016	0	0	0	72	05/25/2067	1.A FE	
..33852B-AN-5	FSMT 192 B1 VARI	03/01/2026	PAY DOWN		3,605	3,605	3,149	3,239	0	366	0	366	0	3,605	0	0	0	24	12/25/2049	1.A	
..36168M-AA-1	GCAT 22NQ3 A1 SR AVAILFUNDS F	03/01/2026	PAY DOWN		6,901	6,901	6,812	6,842	0	59	0	59	0	6,901	0	0	0	53	04/25/2067	1.A	
..36261M-AB-5	GSMS 21P1 A2 FIX	03/01/2026	PAY DOWN		2,099	2,099	2,186	2,179	0	(80)	0	(80)	0	2,099	0	0	0	14	06/25/2051	1.A	
..36263N-AB-1	GSMS 22P1 A2 FIX	03/01/2026	PAY DOWN		3,389	3,389	3,329	3,336	0	53	0	53	0	3,389	0	0	0	15	05/28/2052	1.A	
..46648R-AY-7	JPMT 181 B1 SUB SEQ VARI	03/01/2026	PAY DOWN		10,039	10,039	8,759	8,955	0	1,084	0	1,084	0	10,039	0	0	0	68	06/25/2048	1.A	
..46654A-AC-3	JPMT 2110 A3 FIX	03/01/2026	PAY DOWN		9,121	9,121	9,293	9,275	0	(154)	0	(154)	0	9,121	0	0	0	44	12/25/2051	1.A	
..46592T-AC-7	JPMT 218 A3 FIX	03/01/2026	PAY DOWN		6,153	6,153	6,233	6,224	0	(71)	0	(71)	0	6,153	0	0	0	42	12/25/2051	1.A	
..64831U-AA-2	NRMLT 22NQ4 A1 SR AVAILFUNDS	03/01/2026	PAY DOWN		11,753	11,753	11,714	11,716	0	37	0	37	0	11,753	0	0	0	124	06/25/2062	1.A	
..75409T-AA-3	RATE 21J3 A1 FIX	03/01/2026	PAY DOWN		14,649	14,649	14,798	14,776	0	(127)	0	(127)	0	14,649	0	0	0	75	10/25/2051	1.A	
..81750D-AA-1	SEQMT 2513 A1 WGTAVE VARI	03/01/2026	PAY DOWN		29,907	29,907	29,935	29,935	0	(28)	0	(28)	0	29,907	0	0	0	302	12/25/2055	1.A FE	
..91743P-EA-9	UTAH HOUSING CORPORATION	03/21/2026	PAY DOWN		5,158	5,158	5,363	5,340	0	(181)	0	(181)	0	5,158	0	0	0	26	02/21/2052	1.B FE	

STATEMENT AS OF MARCH 31, 2026 OF THE Medical Malpractice Joint Underwriting Association of Rhode Island

**SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stocks 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	
1059999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - non-agency residential mortgage-backed securities (unaffiliated)				111,790	111,790	110,363	110,683	0	1,108	0	1,108	0	111,790	0	0	0	859	XXX	XXX	
618937-AA-4	MSAIC 2024-1A A	02/05/2026	VARIOUS		354,961	363,971	363,004	363,100	0	9	0	9	0	363,108	0	(8,147)	(8,147)	2,549	09/20/2049	1.D FE	
1119999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - other financial asset-backed securities - self-liquidating (unaffiliated)				354,961	363,971	363,004	363,100	0	9	0	9	0	363,108	0	(8,147)	(8,147)	2,549	XXX	XXX	
00039N-AA-2	AASET 2025-2A A	03/16/2026	PAY DOWN		17,360	17,360	17,359	17,359	0	1	0	1	0	17,360	0	0	0	160	02/16/2050	1.F FE	
12530M-AA-3	CF HIPPOLYTA ISSUER LLC SERIES 2020-1	03/15/2026	PAY DOWN		3,924	3,924	3,548	3,922	0	2	0	2	0	3,924	0	0	0	11	07/15/2060	1.E FE	
14855Y-AA-0	CLAST 2025-3A A	03/15/2026	PAY DOWN		7,976	7,976	7,976	7,976	0	0	0	0	0	7,976	0	0	0	68	11/15/2050	1.F FE	
63943G-AA-0	NAVTR 2025-1 A	03/15/2026	PAY DOWN		6,060	6,060	6,060	6,060	0	0	0	0	0	6,060	0	0	0	52	10/15/2050	1.F FE	
62990M-AC-8	NMEF FUNDING 2022-B LLC	03/15/2026	PAY DOWN		167,415	167,415	170,044	167,789	0	(374)	0	(374)	0	167,415	0	0	0	1,879	06/15/2029	1.C FE	
82667C-AC-9	SRL 2024-1A A	03/17/2026	PAY DOWN		536	536	536	536	0	0	0	0	0	536	0	0	0	5	05/17/2054	1.C FE	
86212F-AB-5	STR 2025-1A A2	03/20/2026	PAY DOWN		844	844	844	844	0	0	0	0	0	844	0	0	0	7	10/20/2055	1.A FE	
872480-AA-6	TIF FUNDING I I LLC	03/20/2026	PAY DOWN		10,000	10,000	8,667	9,355	0	644	0	644	0	10,000	0	0	0	35	08/20/2045	1.F FE	
970910-AA-3	WILLIS ENGINE STRUCTURED TRUST IX	03/15/2026	PAY DOWN		2,844	2,844	2,844	2,844	0	0	0	0	0	2,844	0	0	0	23	12/15/2050	1.F FE	
97064Y-AA-2	WILLIS ENGINE STRUCTURED TRUST VII SERIE	03/15/2026	PAY DOWN		79,400	79,400	78,485	79,043	0	357	0	357	0	79,400	0	0	0	1,159	10/15/2048	1.F FE	
1519999999	Subtotal - asset-backed securities - non-financial asset-backed securities - practical expedient - lease-backed securities - practical expedient (unaffiliated)				296,359	296,359	296,363	295,728	0	630	0	630	0	296,359	0	0	0	3,399	XXX	XXX	
1889999999	Total - asset-backed securities (unaffiliated)				1,199,218	1,208,228	1,201,949	1,201,596	0	5,763	0	5,763	0	1,207,365	0	(8,147)	(8,147)	9,678	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				1,199,218	1,208,228	1,201,949	1,201,596	0	5,763	0	5,763	0	1,207,365	0	(8,147)	(8,147)	9,678	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				1,199,220	1,208,230	1,201,941	1,201,595	0	5,772	0	5,772	0	1,207,367	0	(8,147)	(8,147)	9,682	XXX	XXX	
2009999999	Total - issuer credit obligations and asset-backed securities				1,447,022	1,456,032	1,480,578	1,449,397	0	5,772	0	5,772	0	1,455,169	0	(8,147)	(8,147)	18,640	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				1,447,022	XXX	1,480,578	1,449,397	0	5,772	0	5,772	0	1,455,169	0	(8,147)	(8,147)	18,640	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, 2026 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		03/31/2026	3.570		409,087	3,096	6,536
8309999999. Subtotal - all other money market mutual funds						409,087	3,096	6,536
8589999999. Total cash equivalents (unaffiliated)						409,087	3,096	6,536
8599999999. Total cash equivalents (affiliated)						0	0	0
8609999999 - Total cash equivalents						409,087	3,096	6,536

E14



SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2026 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. Alabama .....AL								
2. Alaska .....AK								
3. Arizona .....AZ								
4. Arkansas .....AR								
5. California .....CA								
6. Colorado .....CO								
7. Connecticut .....CT								
8. Delaware .....DE								
9. District of Columbia .....DC								
10. Florida .....FL								
11. Georgia .....GA								
12. Hawaii .....HI								
13. Idaho .....ID								
14. Illinois .....IL								
15. Indiana .....IN								
16. Iowa .....IA								
17. Kansas .....KS								
18. Kentucky .....KY								
19. Louisiana .....LA								
20. Maine .....ME								
21. Maryland .....MD								
22. Massachusetts .....MA								
23. Michigan .....MI								
24. Minnesota .....MN								
25. Mississippi .....MS								
26. Missouri .....MO								
27. Montana .....MT								
28. Nebraska .....NE								
29. Nevada .....NV								
30. New Hampshire .....NH								
31. New Jersey .....NJ								
32. New Mexico .....NM								
33. New York .....NY								
34. North Carolina .....NC								
35. North Dakota .....ND								
36. Ohio .....OH								
37. Oklahoma .....OK								
38. Oregon .....OR								
39. Pennsylvania .....PA								
40. Rhode Island .....RI	6,573,716	6,300,568	13,333	1	1,665,484	5,733,303	11	5,521,489
41. South Carolina .....SC								
42. South Dakota .....SD								
43. Tennessee .....TN								
44. Texas .....TX								
45. Utah .....UT								
46. Vermont .....VT								
47. Virginia .....VA								
48. Washington .....WA								
49. West Virginia .....WV								
50. Wisconsin .....WI								
51. Wyoming .....WY								
52. American Samoa .....AS								
53. Guam .....GU								
54. Puerto Rico .....PR								
55. U.S. Virgin Islands .....VI								
56. Northern Mariana Islands .....MP								
57. Canada .....CAN								
58. Aggregate other alien .....OT	0	0	0	0	0	0	0	0
59. Totals	6,573,716	6,300,568	13,333	1	1,665,484	5,733,303	11	5,521,489
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, 2026 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. Alabama .....AL								
2. Alaska .....AK								
3. Arizona .....AZ								
4. Arkansas .....AR								
5. California .....CA								
6. Colorado .....CO								
7. Connecticut .....CT								
8. Delaware .....DE								
9. District of Columbia .....DC								
10. Florida .....FL								
11. Georgia .....GA								
12. Hawaii .....HI								
13. Idaho .....ID								
14. Illinois .....IL								
15. Indiana .....IN								
16. Iowa .....IA								
17. Kansas .....KS								
18. Kentucky .....KY								
19. Louisiana .....LA								
20. Maine .....ME								
21. Maryland .....MD								
22. Massachusetts .....MA								
23. Michigan .....MI								
24. Minnesota .....MN								
25. Mississippi .....MS								
26. Missouri .....MO								
27. Montana .....MT								
28. Nebraska .....NE								
29. Nevada .....NV								
30. New Hampshire .....NH								
31. New Jersey .....NJ								
32. New Mexico .....NM								
33. New York .....NY								
34. North Carolina .....NC								
35. North Dakota .....ND								
36. Ohio .....OH								
37. Oklahoma .....OK								
38. Oregon .....OR								
39. Pennsylvania .....PA								
40. Rhode Island .....RI	254,117	172,041	300,000	1	270,234	3,470,000	16	3,752,705
41. South Carolina .....SC								
42. South Dakota .....SD								
43. Tennessee .....TN								
44. Texas .....TX								
45. Utah .....UT								
46. Vermont .....VT								
47. Virginia .....VA								
48. Washington .....WA								
49. West Virginia .....WV								
50. Wisconsin .....WI								
51. Wyoming .....WY								
52. American Samoa .....AS								
53. Guam .....GU								
54. Puerto Rico .....PR								
55. U.S. Virgin Islands .....VI								
56. Northern Mariana Islands .....MP								
57. Canada .....CAN								
58. Aggregate other alien .....OT	0	0	0	0	0	0	0	0
59. Totals	254,117	172,041	300,000	1	270,234	3,470,000	16	3,752,705
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