ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2014
OF THE CONDITION AND AFFAIRS OF THE

COVENTRY INSURANCE COMPANY

NAIC Group Code 0099
NAIC Company Code 45055
Employer's ID Number 05-0430719

Organized under the Laws of RHODE ISLAND, State of Domicile or Port of Entry RHODE ISLAND

Country of Domicile US

Incorporated/Organized June 6, 1986
Commenced Business June 6, 1986

Statutory Home Office 2225 LANDRUM WAY, BOYNTON BEACH, Florida, US 33437
Main Administrative Office 30 PARK AVENUE, MANHASSET, New York, US 11030 516-365-7440
Mail Address 30 PARK AVENUE, MANHASSET, New York, US 11030 516-365-7440

Primary Location of Books and Records 30 PARK AVENUE, MANHASSET, New York, US 11030 516-365-7440

Internet Website Address N/A

Statutory Statement Contact MYRON SELIG ROSS 561-365-2962
MBROSS1@BELLSOUTH.NET 561-733-5891

OFFICERS
MICHAEL A ORLANDO (PRESIDENT)
MICHAEL P ORLANDO (SECRETARY)
JOHN ORLANDO (TREASURER)

OTHER

DIRECTORS OR TRUSTEES
JOHN ORLANDO
MARK MAHER
MICHAEL A ORLANDO
DANIEL J MOGELNICKI
MICHAEL P ORLANDO

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 NAC, 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.

MICHAEL A ORLANDO (PRESIDENT)
MICHAIL P ORLANDO (SECRETARY)
JOHN ORLANDO (TREASURER)

Subscribed and sworn to before me this day of 2015

 medieval
### EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

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<td>38. Aggregate write-ins for other lines of business</td>
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#### DETAILS OF WRITE-INS

- **Line 34:** Summary of remaining write-ins for Line 34 from overflow page
- **Line 349:** Totals (Line 341 through Line 343 plus Line 346) (Line 34 displayed)

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(a) Finance and service charges not included in Line 1 to Line 35 $5
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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**NONE**
## BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2014

### EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

<table>
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<th>Line of Business</th>
<th>Gross Premiums, Including Policy and Membership Fees, Less Refund Premiums and Premiums on Policies not Taken</th>
<th>1 (Direct Premiums Written)</th>
<th>2 (Direct Premiums Earned)</th>
<th>3 (Dividends Paid or Credited to Policyholders on Direct Business)</th>
<th>4 (Direct Unearned Premiums)</th>
<th>5 (Direct Losses Paid (deducting salvage))</th>
<th>6 (Direct Losses Incurred)</th>
<th>7 (Direct Losses Unpaid)</th>
<th>8 (Direct Defense and Cost Containment Expense Paid)</th>
<th>9 (Direct Defense and Cost Containment Expense Incurred)</th>
<th>10 (Direct Defense and Cost Containment Expense Unpaid)</th>
<th>11 (Commissions and Brokerage Expenses)</th>
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<td>15.3 Guaranteed renewable A and H (b)</td>
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<td>15.4 Non-renewable for stated reasons only (b)</td>
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<td>15.6 Medicare Title XVIII exempt from state taxes or fees</td>
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<td>15.7 All other A and H (b)</td>
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<td>15.8 Federal Employers Health Benefits Plan premium (b)</td>
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<td>16. Workers' compensation</td>
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<td>17.1 Other liability - occurrence</td>
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<td>17.2 Other liability - claims-made</td>
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<td>17.3 Excess workers' compensation</td>
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<td>18. Products liability</td>
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<td>18.1 Private passenger auto no-fault (personal injury protection)</td>
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<tr>
<td>18.3 Commercial auto no-fault (personal injury protection)</td>
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<td>18.4 Commercial auto liability</td>
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<td>18.5 Aggregate write-ins for other lines of business</td>
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<td>35. TOTALS (a)</td>
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</table>

### DETAILS OF WRITE-INS

- 3401
- 3402
- 3403
- 3404
- 3408 Summary of remaining write-ins for Line 34 from overflow page
- 3409 Totals (Line 3401 through Line 3404 plus Line 3408) (Line 34 above)

(a) Finance and service charges not included in Line 1 to Line 35 $  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products …………. and number of persons insured under indemnity only products ……..
Page 53
Sch. P, Pt. 1R, Sn. 1, Products Liability, Occurrence
NONE

Page 54
Sch. P, Pt. 1R, Sn. 2, Products Liability, Claims Made
NONE

Page 55
Sch. P, Pt. 1S, Financial Guaranty/Mortgage Guaranty
NONE

Page 56
Sch. P, Pt. 1T, Warranty
NONE

Page 57
Sch. P, Pt. 2A, Homeowners/Farmowners
NONE

Sch. P, Pt. 2B, Private Passenger Auto Liability/Medical
NONE

Sch. P, Pt. 2C, Commercial Auto/Truck Liability/Medical
NONE

Sch. P, Pt. 2D, Workers' Compensation
NONE

Sch. P, Pt. 2E, Commercial Multiple Peril
NONE

Page 58
Sch P, Pt. 2F, Sn. 1, Medical Professional Liability, Occurrence
NONE

Sch P, Pt. 2F, Sn. 2, Medical Professional Liability Claims Made
NONE

Sch. P, Pt. 2G, Special Liability
NONE

Sch. P, Pt. 2H, Sn. 1, Other Liability, Occurrence
NONE

Sch. P, Pt. 2H, Sn. 2, Other Liability, Claims - Made
NONE
| Page 59          | Sch. P., Pt. 2I, Special Property | NONE |
|                 | Sch. P., Pt. 2J, Auto Physical Damage | NONE |
|                 | Sch. P., Pt. 2K, Fidelity/Surety | NONE |
|                 | Sch. P., Pt. 2L, Other (Including Credit, Accident and Health) | NONE |
|                 | Sch. P., Pt. 2M, International | NONE |
| Page 60         | Sch. P., Pt. 2N, Reinsurance | NONE |
|                 | Sch. P., Pt. 2O, Reinsurance | NONE |
|                 | Sch. P., Pt. 2P, Reinsurance | NONE |
| Page 61         | Sch. P., Pt. 2R, Sn. 1, Products Liability, Occurrence | NONE |
|                 | Sch. P., Pt. 2R, Sn. 2, Products Liability, Claims Made | NONE |
|                 | Sch. P., Pt. 2S, Financial Guaranty/Mortgage Guaranty | NONE |
|                 | Sch. P., Pt. 2T, Warranty | NONE |
| Page 62         | Sch. P., Pt. 3A, Homeowners/Farmowners | NONE |
|                 | Sch. P., Pt. 3B, Private Passenger Auto Liability/Medical | NONE |
|                 | Sch. P., Pt. 3C, Commercial Auto/Truck Liability/Medical | NONE |
|                 | Sch. P., Pt. 3D, Workers' Compensation | NONE |
|                 | Sch. P., Pt. 3E, Commercial Multiple Peril | NONE |
Page 63
Sch. P, Pt. 3F, Sn. 1, Medical Professional Liability, Occurrence
NONE
Sch. P, Pt. 3F, Sn. 2, Medical Professional Liability, Claims Made
NONE
Sch. P, Pt. 3G, Special Liability
NONE
Sch. P, Pt. 3H, Sn. 1, Other Liability, Occurrence
NONE
Sch. P, Pt. 3H, Sn. 2, Other Liability, Claims Made
NONE
Page 64
Sch. P, Pt. 3I, Special Property
NONE
Sch. P, Pt. 3J, Auto Physical Damage
NONE
Sch. P, Pt. 3K, Fidelity/Surety
NONE
Sch. P, Pt. 3L, Other (Including Credit, Accident and Health)
NONE
Sch. P, Pt. 3M, International
NONE
Page 65
Sch. P, Pt. 3N, Reinsurance
NONE
Sch. P, Pt. 3O, Reinsurance
NONE
Sch. P, Pt. 3P, Reinsurance
NONE
Page 66
Sch. P, Pt. 3R, Sn. 1, Product Liability, Occurrence
NONE
Sch. P, Pt. 3R, Sn. 2, Product Liability, Claims Made
NONE
Sch. P, Pt. 3S, Financial Guaranty/Mortgage Guaranty
NONE
Sch. P, Pt. 3T, Warranty
NONE
Sch. P, Pt. 4A, Homeowners/Farmowners
NONE

Sch. P, Pt. 4B, Private Passenger Auto Liability/Medical
NONE

Sch. P, Pt. 4C, Commercial Auto/Truck Liability/Medical
NONE

Sch. P, Pt. 4D, Workers' Compensation
NONE

Sch. P, Pt. 4E, Commercial Multiple Peril
NONE

Sch. P, Pt. 4F, Sn. 1, Medical Professional Liability, Occurrence
NONE

Sch P, Pt. 4F, Sn. 2, Medical Professional Liability, Claims Made
NONE

Sch. P, Pt. 4G, Special Liability
NONE

Sch. P, Pt. 4H, Sn. 1, Other Liability, Occurrence
NONE

Sch. P, Pt. 4H, Sn. 2, Other Liability, Claims Made
NONE

Sch. P, Pt. 4I, Special Property
NONE

Sch. P, Pt. 4J, Auto Physical Damage
NONE

Sch. P, Pt. 4K, Fidelity/Surety
NONE

Sch. P, Pt. 4L, Other (Including Credit, Accident and Health)
NONE

Sch. P, Pt. 4M, International
NONE

Sch. P, Pt. 4N, Reinsurance
NONE

Sch. P, Pt. 4O, Reinsurance
NONE

Sch. P, Pt. 4P, Reinsurance
NONE
Page 71
Sch. P, Pt. 4R, Sn. 1, Products Liability, Occurrence
NONE

Sch. P, Pt. 4R, Sn. 2, Products Liability, Claims Made
NONE

Sch. P, Pt. 4S, Financial Guaranty/Mortgage Guaranty
NONE

Sch. P, Pt. 4T, Warranty
NONE

Page 72
Sch. P, Pt. 5A, Sn. 1, Homeowners/Farmowners
NONE

Sch. P, Pt. 5A, Sn. 2, Homeowners/Farmowners
NONE

Sch. P, Pt. 5A, Sn. 3, Homeowners/Farmowners
NONE

Page 73
Sch. P, Pt. 5B, Sn. 1, Private Passenger Auto Liability/Medical
NONE

Sch. P, Pt. 5B, Sn. 2, Private Passenger Auto Liability/Medical
NONE

Sch. P, Pt. 5B, Sn. 3, Private Passenger Auto Liability/Medical
NONE

Page 74
Sch. P, Pt. 5C, Sn. 1, Commercial Auto/Truck Liability/Medical
NONE

Sch. P, Pt. 5C, Sn. 2, Commercial Auto/Truck Liability/Medical
NONE

Sch. P, Pt. 5C, Sn. 3, Commercial Auto/Truck Liability/Medical
NONE

Page 75
Sch. P, Pt. 5D, Sn. 1, Workers' Compensation
NONE

Sch. P, Pt. 5D, Sn. 2, Workers' Compensation
NONE

Sch. P, Pt. 5D, Sn. 3, Workers' Compensation
NONE
Page 76
Sch. P, Pt. 5E, Sn. 1, Commercial Multiple Peril
NONE

Sch. P, Pt. 5E, Sn. 2, Commercial Multiple Peril
NONE

Sch. P, Pt. 5E, Sn. 3, Commercial Multiple Peril
NONE

Page 77
Sch P, Pt. 5F, Sn. 1A, Medical Professional Liability, Occurrence
NONE

Sch P, Pt. 5F, Sn. 2A, Medical Professional Liability, Occurrence
NONE

Sch P, Pt. 5F, Sn. 3A, Medical Professional Liability, Occurrence
NONE

Page 78
Sch P, Pt. 5F, Sn. 1B, Medical Professional Liability Claims Made
NONE

Sch P, Pt. 5F, Sn. 2B, Medical Professional Liability Claims Made
NONE

Sch P, Pt. 5F, Sn. 3B, Medical Professional Liability Claims Made
NONE

Page 79
Sch. P, Pt. 5H, Sn. 1A, Other Liability, Occurrence
NONE

Sch. P, Pt. 5H, Sn. 2A, Other Liability, Occurrence
NONE

Sch. P, Pt. 5H, Sn. 3A, Other Liability, Occurrence
NONE

Page 80
Sch. P, Pt. 5H, Sn. 1B, Other Liability, Claims Made
NONE

Sch. P, Pt. 5H, Sn. 2B, Other Liability, Claims Made
NONE

Sch. P, Pt. 5H, Sn. 3B, Other Liability, Claims Made
NONE

Page 81
Sch. P, Pt. 5R, Sn. 1A, Products Liability, Occurrence
NONE

Sch. P, Pt. 5R, Sn. 2A, Products Liability, Occurrence
NONE

Sch. P, Pt. 5R, Sn. 3A, Products Liability, Occurrence
NONE
Page 82
Sch. P, Pt. 5R, Sn. 1B, Products Liability, Claims Made
NONE

Sch. P, Pt. 5R, Sn. 2B, Products Liability, Claims Made
NONE

Sch. P, Pt. 5R, Sn. 3B, Products Liability, Claims Made
NONE

Page 83
Sch. P, Pt. 5T, Sn. 1, Warranty
NONE

Sch. P, Pt. 5T, Sn. 2, Warranty
NONE

Sch. P, Pt. 5T, Sn. 3, Warranty
NONE

Page 84
Sch. P, Pt. 6C, Sn. 1, Commercial Auto/Truck Liability/Medical
NONE

Sch. P, Pt. 6C, Sn. 2, Commercial Auto/Truck Liability/Medical
NONE

Sch. P, Pt. 6D, Sn. 1, Workers' Compensation
NONE

Sch. P, Pt. 6D, Sn. 2, Workers' Compensation
NONE

Page 85
Sch. P, Pt. 6E, Sn. 1, Commercial Multiple Peril
NONE

Sch. P, Pt. 6E, Sn. 2, Commercial Multiple Peril
NONE

Sch. P, Pt. 6H, Sn. 1A, Other Liability, Occurrence
NONE

Sch. P, Pt. 6H, Sn. 2A, Other Liability, Occurrence
NONE

Page 86
Sch. P, Pt. 6H, Sn. 1B, Other Liability, Claims Made
NONE

Sch. P, Pt. 6H, Sn. 2B, Other Liability, Claims Made
NONE

Sch. P, Pt. 6M, Sn. 1, International
NONE

Sch. P, Pt. 6M, Sn. 2, International
NONE
Page 87
Sch. P, Pt. 6N, Sn. 1, Reinsurance
NONE

Sch. P, Pt. 6N, Sn. 2, Reinsurance
NONE

Sch. P, Pt. 6O, Sn. 1, Reinsurance
NONE

Sch. P, Pt. 6O, Sn. 2, Reinsurance
NONE

Page 88
Sch. P, Pt. 6R, Sn. 1A, Products Liability, Occurrence
NONE

Sch. P, Pt. 6R, Sn. 2A, Products Liability, Occurrence
NONE

Sch. P, Pt. 6R, Sn. 1B, Products Liability, Claims Made
NONE

Sch. P, Pt. 6R, Sn. 2B, Products Liability, Claims Made
NONE

Page 89
Sch. P, Pt. 7A, Sn. 1, Primary, Loss Sensitive Contracts
NONE

Sch. P, Pt. 7A, Sn. 2, Incurred Losses and Cost Containment Exp
NONE

Sch. P, Pt. 7A, Sn. 3, Bulk and Incurred But Not Reported Res.
NONE

Page 90
Sch. P, Pt. 7A, Sn. 4, Net Earned Premiums Reported
NONE

Sch. P, Pt. 7A, Sn. 5, Net Reserve for Premium Adjustments
NONE

Page 91
Sch. P, Pt. 7B, Sn. 1, Reinsurance Loss Sensitive Contracts
NONE

NONE

Sch. P, Pt. 7B, Sn. 3, Bulk Incurred But Not Reported Reserves
NONE
Sch. P., Pt. 7B, Sn. 4, Net Earned Premiums Reported at Year End
NONE

Sch. P., Pt. 7B, Sn. 5, Net Reserve for Premium Adjustments
NONE

Sch. P., Pt. 7B, Sn. 6, Incurred Adjustable Commissions
NONE

Sch. P., Pt. 7B, Sn. 7, Reserves for Commission Adjustments
NONE
1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes ( ) No ( )

If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

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

1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #67? Yes ( ) No ( )

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

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.7? Yes ( ) No ( ) N/A ( )

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

1.6.11 2014
1.6.10 2013
1.6.09 2012
1.6.07 2010
1.6.06 2009
1.6.05 2008
1.6.04 2007
1.6.03 2006
1.6.02 2005
1.6.01 Prior

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

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

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

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 5 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

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

5. What were the net premiums in force at the end of the year for:
   (in thousands of dollars)
   5.1 Fixedly $ 
   5.2 Surely $ 

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

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

7.2 An extended statement may be attached.
## SCHEDULE Y

### PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

<table>
<thead>
<tr>
<th>Group Code</th>
<th>Group Name</th>
<th>NAIC Company Code</th>
<th>ID Number</th>
<th>Federal RSSD</th>
<th>OK</th>
<th>Name of Securities Exchange if Publicly Traded (U.S. or International)</th>
<th>Name of Parent, Subsidiaries or Affiliates</th>
<th>Domiciliary Location</th>
<th>Relationship to Reporting Entity</th>
<th>Type of Control (Ownership, Board Management, Attorney-in-Fact, Influence, Other)</th>
<th>Directly Controlled by (Name of Entity/Person)</th>
<th>If Control is Ownership Provide Percentage</th>
<th>Ultimate Controlling Entity(ies)/Person(s)</th>
<th>Asterisk</th>
<th>Explanation</th>
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<td>000</td>
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<td>05-0420792</td>
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<td>COVENTRY INS CO</td>
<td>RI</td>
<td>PAR</td>
<td>ORLANDO MANAGEMENT CORP</td>
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<td>MICHAEL A ORLANDO</td>
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<td>WARWICK REINSURANCE INTERMEDIARIES INC.</td>
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<td>PAR</td>
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<td>COVENTRY INS CO</td>
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<td>RI</td>
<td>WARWICK REINSURANCE INTERMEDIARIES INC</td>
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#### Asterisk Explanation

NONE
### SCHEDULE Y

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

<table>
<thead>
<tr>
<th>NAIC Company Code</th>
<th>ID Number</th>
<th>Names of Insurers and Parent, Subsidiaries or Affiliates</th>
<th>Shareholder Dividends</th>
<th>Capital Contributions</th>
<th>Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments</th>
<th>Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)</th>
<th>Management Agreements and Service Contracts</th>
<th>Income/ (Disbursements) Incurred Under Reinsurance Agreements</th>
<th>Any Other Material Activity Not in the Ordinary Course of the Insurer’s Business</th>
<th>Totals</th>
<th>Reinsurance Recoverables/ (Payable) on Loans and/or Reserve Credit Taken/ (Liability)</th>
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<tbody>
<tr>
<td></td>
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<td>NONE</td>
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The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

### March Filing

<table>
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<tr>
<th>1. Will an actuarial opinion be filed by March 1?</th>
<th>WAIVED</th>
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<tbody>
<tr>
<td><strong>EXPLANATION:</strong></td>
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<td><strong>BARCODE:</strong> Document Identifier 440:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?</th>
<th>WAIVED</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXPLANATION:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>BARCODE:</strong> Document Identifier 460:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?</th>
<th>SEE EXPLANATION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXPLANATION:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>BARCODE:</strong> Document Identifier 360:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXPLANATION:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>BARCODE:</strong> Document Identifier 360:</td>
<td></td>
</tr>
</tbody>
</table>

### April Filing

<table>
<thead>
<tr>
<th>5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXPLANATION:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>BARCODE:</strong> Document Identifier 270:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. Will Management’s Discussion and Analysis be filed by April 1?</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXPLANATION:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>BARCODE:</strong> Document Identifier 360:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXPLANATION:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>BARCODE:</strong> Document Identifier 285:</td>
<td></td>
</tr>
</tbody>
</table>

### May Filing

<table>
<thead>
<tr>
<th>8. Will this company be included in a combined annual statement that is filed with the NAIC by May 1?</th>
<th>SEE EXPLANATION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXPLANATION:</strong></td>
<td>none required</td>
</tr>
<tr>
<td><strong>BARCODE:</strong> Document Identifier 281:</td>
<td></td>
</tr>
</tbody>
</table>
ANNUAL STATEMENT FOR THE YEAR 2014 OF THE COVENTRY INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES (Continued)

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

JUNE FILING

9. Will an audited financial report be filed by June 1? YES

EXPLANATION:

BARCODE: Document Identifier 220:

10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? YES

EXPLANATION:

BARCODE: Document Identifier 221:

AUGUST FILING

11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1? WAIVED

EXPLANATION:

BARCODE: Document Identifier 222:

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.

MARCH FILING

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? NO

EXPLANATION:

BARCODE: Document Identifier 420:

13. Will the Financial Guaranty Insurance Exhibit be filed by March 1? NO

EXPLANATION:

BARCODE: Document Identifier 240:

14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? NO

EXPLANATION:

BARCODE: Document Identifier 360:

15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? NO

EXPLANATION:

BARCODE: Document Identifier 455:

16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? NO

EXPLANATION:

BARCODE: Document Identifier 490:
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.

**RESPONSES**

**MARCH FILING**

<table>
<thead>
<tr>
<th>Interrogatory</th>
<th>Response</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?</td>
<td>NO</td>
<td></td>
</tr>
<tr>
<td>18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?</td>
<td>NO</td>
<td></td>
</tr>
<tr>
<td>19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?</td>
<td>NO</td>
<td></td>
</tr>
<tr>
<td>20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?</td>
<td>NO</td>
<td></td>
</tr>
<tr>
<td>21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?</td>
<td>NO</td>
<td></td>
</tr>
<tr>
<td>22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?</td>
<td>NO</td>
<td></td>
</tr>
<tr>
<td>23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?</td>
<td>NO</td>
<td></td>
</tr>
<tr>
<td>24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?</td>
<td>NO</td>
<td></td>
</tr>
</tbody>
</table>
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.

**MARCH FILING**

25. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?

NO

**EXPLANATION:**

**BARCODE:**

Document Identifier 224:

26. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?

NO

**EXPLANATION:**

**BARCODE:**

Document Identifier 225:

27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?

NO

**EXPLANATION:**

**BARCODE:**

Document Identifier 226:

**APRIL FILING**

28. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?

NO

**EXPLANATION:**

no credit insurance written

**BARCODE:**

Document Identifier 230:

29. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?

NO

**EXPLANATION:**

no long term care policies written

**BARCODE:**

Document Identifier 306:

30. Will the Accident and Health Policy Experience Exhibit be filed by April 1?

NO

**EXPLANATION:**

no accident & health policies written

**BARCODE:**

Document Identifier 210:

31. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?

NO

**EXPLANATION:**

no health care policies written

**BARCODE:**

Document Identifier 216:

32. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?

NO

**EXPLANATION:**

no health care policies written

**BARCODE:**

Document Identifier 217:
### RESPONSES

<table>
<thead>
<tr>
<th>AUGUST FILING</th>
</tr>
</thead>
<tbody>
<tr>
<td>33. Will Management’s Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?</td>
</tr>
</tbody>
</table>

**EXPLANATION:**

No explanation provided.

**BARCODE:**

Document Identifier 223: