

QUARTERLY STATEMENT

As of June 30, 2019
of the Condition and Affairs of the

Medical Malpractice Joint Underwriting Association of Rhode Island

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

OFFICERS

Name	Title	Name	Title
1. Timothy Knapp	Vice Chair	2. Earl Cottam Jr. #	Chair
3. Jerilynn Leahy	Assistant Secretary	4. Lars Bo Kristiansen #	Secretary

OTHER

DIRECTORS OR TRUSTEES

Daniel Wright	James Pascalides DPM	Earl Cottam Jr.	Timothy Knapp
Don Baldini	Lars Bo Kristiansen #	Barbara M Cavicchio DDS	Newell Warde

State of..... Rhode Island
County of..... Kent

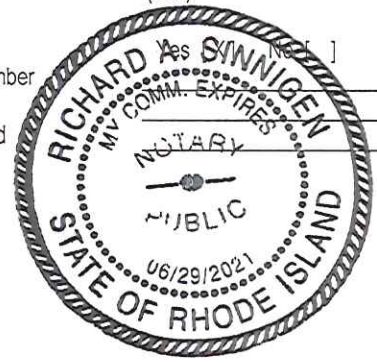
The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any 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.

_____ (Signature) Timothy Knapp 1. (Printed Name) Vice Chair (Title)	_____ (Signature) Earl Cottam Jr. 2. (Printed Name) Chair (Title)	_____ (Signature) Jerilynn Leahy 3. (Printed Name) Assistant Secretary (Title)
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Subscribed and sworn to before me
This 24th day of July 2019

- a. Is this an original filing?
- b. If no:
 1. State the amendment number
 2. Date filed
 3. Number of pages attached

Richard A. Sinnigen
RICHARD A. SINNIGEN
ID # 25805
My Commission expires 6/29/21
This notarization is for Earl Francis Cottam Jr. only
RS





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Statutory Statement Contact	Jerilynn Leahy <i>(Name)</i> jleahy@beechercarlson.com <i>(E-Mail Address)</i>	401-369-8245 <i>(Area Code) (Telephone Number) (Extension)</i> 401-369-8241 <i>(Fax Number)</i>

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

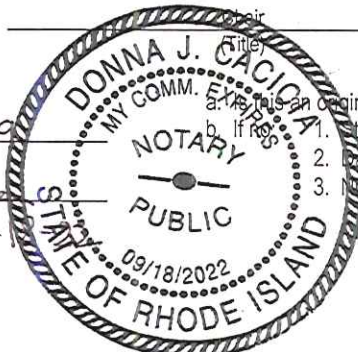
The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any 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.

_____ (Signature) Timothy Knapp 1. (Printed Name) Vice Chair (Title)	_____ (Signature) Earl Cottam Jr. 2. (Printed Name) Chair (Title)	 (Signature) Jerilynn Leahy 3. (Printed Name) Assistant Secretary (Title)
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Subscribed and sworn to before me
This 2nd day of July 2019

my commission expires 9-18-2022

a. This is an original filing?
 b. If not, state the amendment number
 1. _____
 2. Date filed _____
 3. Number of pages attached _____



Yes No

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.....	88,740,513		88,740,513	88,938,221
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....			0	
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....834,501), cash equivalents (\$....147,352) and short-term investments (\$.....0).....	981,853		981,853	1,573,645
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....	62,352,733		62,352,733	59,089,912
9. Receivables for securities.....	26		26	99
10. Securities lending reinvested collateral assets.....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	152,075,125	0	152,075,125	149,601,877
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	1,444,081		1,444,081	1,343,242
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	47,665		47,665	(67,097)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	118,467		118,467	126,188
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	72,680
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	3,117	0	3,117	3,556
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	153,688,455	0	153,688,455	151,080,446
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	153,688,455	0	153,688,455	151,080,446

DETAILS OF WRITE-INS

1101.....			0	
1102.....			0	
1103.....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Miscellaneous Accounts Receivable.....	3,117		3,117	2,056
2502. Prepaid Losses.....			0	
2503. Prepaid premium tax.....			0	1,500
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	3,117	0	3,117	3,556

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31 Prior Year
1. Losses (current accident year \$.....1,159,102).....	21,355,662	24,176,435
2. Reinsurance payable on paid losses and loss adjustment expenses.....		
3. Loss adjustment expenses.....	7,340,128	8,903,520
4. Commissions payable, contingent commissions and other similar charges.....	70,628	67,359
5. Other expenses (excluding taxes, licenses and fees).....	246,519	184,047
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....		
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	442,200	181,658
7.2 Net deferred tax liability.....	444,749	
8. Borrowed money \$.....0 and interest thereon \$.....0.....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$.....0 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	2,108,316	1,992,197
10. Advance premium.....	58,238	74,355
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....		
13. Funds held by company under reinsurance treaties.....		
14. Amounts withheld or retained by company for account of others.....	960,527	960,527
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....		
20. Derivatives.....		
21. Payable for securities.....		
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	6,534	16,523
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	33,033,501	36,556,621
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	33,033,501	36,556,621
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).....	120,654,954	114,523,825
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36).....	120,654,954	114,523,825
38. Totals (Page 2, Line 28, Col. 3).....	153,688,455	151,080,446

DETAILS OF WRITE-INS

2501. Unearned Finance Charge.....		
2502. Premium Deficiency Reserve.....		
2503. Losses Payable.....	6,534	16,523
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	6,534	16,523
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$.... 1,068,886).....	952,766	910,676	1,819,475
1.2 Assumed..... (written \$.....0).....			
1.3 Ceded..... (written \$.....0).....			
1.4 Net..... (written \$.... 1,068,886).....	952,766	910,676	1,819,475
DEDUCTIONS:			
2. Losses incurred (current accident year \$.... 1,159,102):			
2.1 Direct.....	(1,770,508)	(3,071,350)	(3,660,619)
2.2 Assumed.....			
2.3 Ceded.....			
2.4 Net.....	(1,770,508)	(3,071,350)	(3,660,619)
3. Loss adjustment expenses incurred.....	(1,306,456)	(1,019,552)	(738,795)
4. Other underwriting expenses incurred.....	694,648	830,736	1,602,181
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	(2,382,316)	(3,260,166)	(2,797,233)
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	3,335,082	4,170,842	4,616,708
INVESTMENT INCOME			
9. Net investment income earned.....	2,532,139	2,342,461	4,883,368
10. Net realized capital gains (losses) less capital gains tax of \$.... 128,880.....	484,834	35,612	1,758,434
11. Net investment gain (loss) (Lines 9 + 10).....	3,016,973	2,378,073	6,641,802
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0).....	0		
13. Finance and service charges not included in premiums.....	7,728	8,463	16,691
14. Aggregate write-ins for miscellaneous income.....	(750,000)	(536,000)	(536,000)
15. Total other income (Lines 12 through 14).....	(742,272)	(527,537)	(519,309)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	5,609,783	6,021,378	10,739,201
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).....	5,609,783	6,021,378	10,739,201
19. Federal and foreign income taxes incurred.....	931,661	1,136,282	1,764,050
20. Net income (Line 18 minus Line 19) (to Line 22).....	4,678,122	4,885,096	8,975,151
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	114,523,825	108,267,032	108,267,032
22. Net income (from Line 20).....	4,678,122	4,885,096	8,975,151
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.... 413,792.....	1,556,645	169,710	(2,744,434)
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	(103,638)	1,345	26,076
27. Change in nonadmitted assets.....			
28. Change in provision for reinsurance.....			
29. Change in surplus notes.....			
30. Surplus (contributed to) withdrawn from protected cells.....			
31. Cumulative effect of changes in accounting principles.....			
32. Capital changes:			
32.1 Paid in.....			
32.2 Transferred from surplus (Stock Dividend).....			
32.3 Transferred to surplus.....			
33. Surplus adjustments:			
33.1 Paid in.....			
33.2 Transferred to capital (Stock Dividend).....			
33.3 Transferred from capital.....			
34. Net remittances from or (to) Home Office.....			
35. Dividends to stockholders.....			
36. Change in treasury stock.....			
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	6,131,129	5,056,151	6,256,793
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	120,654,954	113,323,183	114,523,825

DETAILS OF WRITE-INS

0501. Change in Premium Deficiency Reserve.....			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401. Gain or loss on retroactive reinsurance.....	(750,000)	(536,000)	(536,000)
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	(750,000)	(536,000)	(536,000)
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

Medical Malpractice Joint Underwriting Association of Rhode Island

CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	945,730	1,014,393	1,980,683
2. Net investment income.....	2,632,426	2,637,768	5,318,187
3. Miscellaneous income.....	(678,566)	(1,304,069)	(1,341,213)
4. Total (Lines 1 through 3).....	2,899,590	2,348,092	5,957,657
5. Benefit and loss related payments.....	1,050,265	746,985	1,202,606
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	959,101	1,068,143	2,080,979
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.00 tax on capital gains (losses).....	800,000	1,100,000	2,200,000
10. Total (Lines 5 through 9).....	2,809,366	2,915,128	5,483,585
11. Net cash from operations (Line 4 minus Line 10).....	90,224	(567,036)	474,072
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	4,965,522	11,594,268	17,389,215
12.2 Stocks.....			
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....	73	63,948	
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	4,965,595	11,658,216	17,389,215
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	4,923,860	11,241,977	16,843,500
13.2 Stocks.....			
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....	723,751	1	795,875
13.7 Total investments acquired (Lines 13.1 to 13.6).....	5,647,611	11,241,978	17,639,375
14. Net increase or (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(682,016)	416,238	(250,160)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			
16.6 Other cash provided (applied).....			63,267
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	0	0	63,267
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(591,792)	(150,798)	287,179
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	1,573,645	1,286,467	1,286,467
19.2 End of period (Line 18 plus Line 19.1).....	981,853	1,135,669	1,573,645
Note: Supplemental disclosures of cash flow information for non-cash transactions:			
20.0001			

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 coverage's 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.

	SSAP #	F/S Page	F/S Line #	Current Year to Date	2018
NET INCOME					
(1) Medical Malpractice Joint Underwriting Association of Rhode Island Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 4,678,122	\$ 8,975,151
(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	\$ 4,678,122	\$ 8,975,151
SURPLUS					
(5) Medical Malpractice Joint Underwriting Association of Rhode Island Company state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 120,654,954	\$ 114,523,825
(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	\$ 120,654,954	\$ 114,523,825

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

Short-term investments are stated at amortized cost.

(2) Basis for Bonds and Amortization Schedule

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

(3) Basis for Common Stocks

The MMJUA holds no investments in common stocks.

(4) Basis for Preferred Stocks

The MMJUA holds no investments in preferred stocks.

(5) Basis for Mortgage Loans

The MMJUA holds no investments in first lien mortgage loans on real estate.

NOTES TO FINANCIAL STATEMENTS

(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.

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

The MMJUA has no subsidiaries

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

The MMJUA holds no interest in joint ventures or partnerships.

(9) Accounting Policies for Derivatives

The MMJUA does not invest in derivative instruments.

(10) Anticipated Investment Income Used in Premium Deficiency Calculation

The MMJUA does not have a premium deficiency reserve.

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

The reserve for unpaid losses and loss adjustment expenses represents the estimated unpaid ultimate liability for claims reported to the MMJUA plus claims incurred but not yet reported and the related estimated loss adjustment expenses. In establishing this reserve, the MMJUA utilizes the findings of an independent consulting actuary. The reserves for unpaid losses and loss adjustment expenses are estimated using individual case basis valuations and statistical analyses. Those estimates are subject to the effects of trends in loss severity and frequency.

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

The MMJUA does not have a capitalization policy.

(13) Method Used to Estimate Pharmaceutical Rebate Receivables

Not applicable as the MMJUA does not write major medical insurance with prescription drug coverage.

D. Going Concern

None

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

Note 8 – Derivative Instruments

Not applicable

Note 9 – Income Taxes

No significant 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 Premiums Written/Produced By
Beecher Carlson Insurance Services LLC	95-3679538	YES	Medical Malpractice, General Liability	C, CA, R, B, P, U	1,068,886
Total	XXX	XXX	XXX	XXX	1,068,886

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

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

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

There are no bonds measured at fair market value.

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

(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	\$ 93,519,336	\$ 88,740,513	\$ -	\$ 93,519,336	\$	\$	\$
Cash, cash equivalents and short-term investments	\$ 981,853	\$ 981,853	\$ 981,853	\$ -	\$	\$	\$
Other Invested Assets	\$ 64,248,787	\$ 62,352,733	\$ 6,892,267	\$ 57,356,519	\$	\$	\$

D. Not Practicable to Estimate Fair Value

Not applicable

E. NAV Practical Expedient Investments

Not applicable

Note 21 – Other Items

Not applicable

Note 22 – Events Subsequent

Subsequent events have been considered through August 5, 2019 for these statutory financial statements which are to be issued on August 15, 2019. There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

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 favorable development of \$4.7 million attributable to insured events of prior years. The reason for the favorable change relates to claims settling for less than originally expected.

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.

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 Loss Adjustment Expenses

Not applicable

Note 33 – Asbestos/Environmental Reserves

Not applicable

Note 34 – Subscriber Savings Accounts

NOTES TO FINANCIAL STATEMENTS

Not applicable

Note 35 – Multiple Peril Crop Insurance

Not applicable

Note 36 – Financial Guaranty Insurance

Not applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change: _____
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? 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]
If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.
- 4.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? 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. 12/31/2015
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2015
- 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). 01/18/2017
- 6.4 By what department or departments?
State of Rhode Island Department of Business Regulation, Insurance Division
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [X] No [] N/A []
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:
- 8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

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

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

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

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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: \$ 0

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]
- 11.2 If yes, give full and complete information relating thereto:

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ 0
13. Amount of real estate and mortgages held in short-term investments: \$ 0
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]

14.2 If yes, please complete the following:

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

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []
- If no, attach a description with this statement.

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

- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0
- 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0
- 16.3 Total payable for securities lending reported on the liability page: \$ 0

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

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

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

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

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

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

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

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

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

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

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
107423	Conning, Inc.	549300ZOGI4KK37BDV40	SEC	DS

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

18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

- 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
- 20. By self-designating PLGI securities, the reporting entity is certifying the following elements for each self-designated PLGI security:
 - a. The security was purchased prior to January 1, 2018.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
Has the reporting entity self-designated PLGI securities? Yes No

GENERAL INTERROGATORIES (continued)

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:

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

5. Operating Percentages:

5.1 A&H loss percent	0.000%
5.2 A&H cost containment percent	0.000%
5.3 A&H expense percent excluding cost containment expenses	0.000%

6.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

6.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$ 0

6.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

6.4 If yes, please provide the amount of funds administered as of the reporting date. \$ 0

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
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NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status (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	1,068,886	1,079,160	1,050,265	746,984	21,355,662	25,221,325
41. South Carolina.....SC	N						
42. South Dakota.....SD	N						
43. Tennessee.....TN	N						
44. Texas.....TX	N						
45. Utah.....UT	N						
46. Vermont.....VT	N						
47. Virginia.....VA	N						
48. Washington.....WA	N						
49. West Virginia.....WV	N						
50. Wisconsin.....WI	N						
51. Wyoming.....WY	N						
52. American Samoa.....AS	N						
53. Guam.....GU	N						
54. Puerto Rico.....PR	N						
55. US Virgin Islands.....VI	N						
56. Northern Mariana Islands.....MP	N						
57. Canada.....CAN	N						
58. Aggregate Other Alien.....OT	XXX	0	0	0	0	0	0
59. Totals.....	XXX	1,068,886	1,079,160	1,050,265	746,984	21,355,662	25,221,325

DETAILS OF WRITE-INS

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

(a) Active Status Count

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

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

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

Medical Malpractice Joint Underwriting Association of Rhode Island

PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....			0.000	
2. Allied lines.....			0.000	
3. Farmowners multiple peril.....			0.000	
4. Homeowners multiple peril.....			0.000	
5. Commercial multiple peril.....			0.000	
6. Mortgage guaranty.....			0.000	
8. Ocean marine.....			0.000	
9. Inland marine.....			0.000	
10. Financial guaranty.....			0.000	
11.1. Medical professional liability - occurrence.....	478,564	(1,771,910)	(370,256)	(504.674)
11.2. Medical professional liability - claims-made.....	348,665	16,287	4.671	0.087
12. Earthquake.....			0.000	
13. Group accident and health.....			0.000	
14. Credit accident and health.....			0.000	
15. Other accident and health.....			0.000	
16. Workers' compensation.....			0.000	
17.1 Other liability-occurrence.....	125,537	(14,885)	(11,857)	(263.850)
17.2 Other liability-claims made.....			0.000	
17.3 Excess workers' compensation.....			0.000	
18.1 Products liability-occurrence.....			0.000	
18.2 Products liability-claims made.....			0.000	
19.1, 19.2 Private passenger auto liability.....			0.000	
19.3, 19.4 Commercial auto liability.....			0.000	
21. Auto physical damage.....			0.000	
22. Aircraft (all perils).....			0.000	
23. Fidelity.....			0.000	
24. Surety.....			0.000	
26. Burglary and theft.....			0.000	
27. Boiler and machinery.....			0.000	
28. Credit.....			0.000	
29. International.....			0.000	
30. Warranty.....			0.000	
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0.000	
35. Totals.....	952,766	(1,770,508)	(185.828)	(337.260)
DETAILS OF WRITE-INS				
3401.....			0.000	
3402.....			0.000	
3403.....			0.000	
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.000	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0.000	

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1	2	3
	Current Quarter	Current Year to Date	Prior Year Year to Date
1. Fire.....			
2. Allied lines.....			
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....			
5. Commercial multiple peril.....			
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....			
10. Financial guaranty.....			
11.1 Medical professional liability - occurrence.....	183,361	475,409	521,549
11.2 Medical professional liability - claims made.....	133,020	402,597	361,141
12. Earthquake.....			
13. Group accident and health.....			
14. Credit accident and health.....			
15. Other accident and health.....			
16. Workers' compensation.....			
17.1 Other liability-occurrence.....	96,294	190,880	196,470
17.2 Other liability-claims made.....			
17.3 Excess workers' compensation.....			
18.1 Products liability-occurrence.....			
18.2 Products liability-claims made.....			
19.1 19.2 Private passenger auto liability.....			
19.3 19.4 Commercial auto liability.....			
21. Auto physical damage.....			
22. Aircraft (all perils).....			
23. Fidelity.....			
24. Surety.....			
26. Burglary and theft.....			
27. Boiler and machinery.....			
28. Credit.....			
29. International.....			
30. Warranty.....			
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0
35. Totals.....	412,675	1,068,886	1,079,160
DETAILS OF WRITE-INS			
3401.....			
3402.....			
3403.....			
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0

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)	2019 Loss and LAE Payments on Claims Reported as of Prior Year-End	2019 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2019 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. 2016 + Prior.....	10,235	16,184	26,419	1,286	1	1,287	9,392	173	11,487	21,052	443	(4,523)	(4,080)
2. 2017.....	143	2,974	3,117	6	7	13	429	343	2,309	3,081	292	(315)	(23)
3. Subtotals 2017 + Prior.....	10,378	19,158	29,536	1,292	8	1,300	9,821	516	13,796	24,133	735	(4,838)	(4,103)
4. 2018.....	271	3,273	3,544	7		7	53	5	2,864	2,922	(211)	(404)	(615)
5. Subtotals 2018 + Prior.....	10,649	22,431	33,080	1,299	8	1,307	9,874	521	16,660	27,055	524	(5,242)	(4,718)
6. 2019.....	XXX	XXX	XXX	XXX		0	XXX	25	1,615	1,640	XXX	XXX	XXX
7. Totals.....	10,649	22,431	33,080	1,299	8	1,307	9,874	546	18,275	28,695	524	(5,242)	(4,718)
8. Prior Year-End's Surplus As Regards Policyholders	114,524												
											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
											1.4.9 %	2.(23.4)%	3.(14.3)%
													Col. 13, Line 7 Line 8
													4.(4.1)%

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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

Explanation:

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

Bar Code:



NONE

Medical Malpractice Joint Underwriting Association of Rhode Island SCHEDULE A - VERIFICATION

Real Estate

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

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

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

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	59,089,912	59,589,415
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.....	1,330,272	3,060,865
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....	1,970,437	(3,473,967)
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and depreciation.....	37,888	86,401
9. Total foreign exchange change in book/adjusted carrying value.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	62,352,733	59,089,912
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	62,352,733	59,089,912

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.....	88,938,221	89,903,744
2. Cost of bonds and stocks acquired.....	4,923,859	16,843,500
3. Accrual of discount.....	14,767	25,444
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....	7,203	(35,716)
6. Deduct consideration for bonds and stocks disposed of.....	4,965,522	17,418,708
7. Deduct amortization of premium.....	178,015	409,536
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....		29,493
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....	88,740,513	88,938,221
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	88,740,513	88,938,221

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
BONDS								
1. NAIC 1 (a).....	71,347,976	1,743,395	2,407,666	(79,758)	71,347,976	70,603,947		71,500,580
2. NAIC 2 (a).....	17,842,688	998,785	844,003	(1,127)	17,842,688	17,996,343		17,156,265
3. NAIC 3 (a).....						0		
4. NAIC 4 (a).....						0		
5. NAIC 5 (a).....	280,687			(687)	280,687	280,000		281,374
6. NAIC 6 (a).....						0		
7. Total Bonds.....	89,471,351	2,742,180	3,251,669	(81,572)	89,471,351	88,880,290	0	88,938,219
PREFERRED STOCK								
8. NAIC 1.....						0		
9. NAIC 2.....						0		
10. NAIC 3.....						0		
11. NAIC 4.....						0		
12. NAIC 5.....						0		
13. NAIC 6.....						0		
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	89,471,351	2,742,180	3,251,669	(81,572)	89,471,351	88,880,290	0	88,938,219

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(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 \$.....139,776; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

**Sch. DA - Pt. 1
NONE**

**Sch. DA - Verification
NONE**

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

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

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

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

**Sch. DB - Verification
NONE**

SCHEDULE E - PART 2 - VERIFICATION

Cash Equivalents

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	27,497	588,164
2. Cost of cash equivalents acquired.....	2,121,366	10,124,524
3. Accrual of discount.....	11	3,454
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	2,001,522	10,688,645
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/ adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	147,352	27,497
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	147,352	27,497

**Sch. A Pt. 2
NONE**

**Sch. A Pt. 3
NONE**

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

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

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

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

SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation and Administrative Symbol/Market Indicator (a)
Bonds - U.S. Government									
912828 S2 7	US TREASURY N/B		06/26/2019	BANK AMERICA		493,750	500,000	2,766	1
0599999	Total - Bonds - U.S. Government					493,750	500,000	2,766	XXX
Bonds - U.S. Special Revenue and Special Assessment									
3137FM CR 1	FHMS K093 A2		06/13/2019	MORGAN STANLEY		1,029,991	1,000,000	1,574	1
3199999	Total - Bonds - U.S. Special Revenue and Special Assessments					1,029,991	1,000,000	1,574	XXX
Bonds - Industrial and Miscellaneous									
57636Q AM 6	MASTERCARD INC		05/28/2019	US BANCORP INVESTMENTS INC		79,890	80,000		1FE
744573 AN 6	PUBLIC SERVICE ENTERPRIS		06/03/2019	BARCLAYS AMERICAN		499,765	500,000		2FE
94106L BG 3	WASTE MANAGEMENT INC		05/14/2019	MIZUHO SECURITIES		499,020	500,000		2FE
3899999	Total - Bonds - Industrial and Miscellaneous					1,078,675	1,080,000	0	XXX
8399997	Total - Bonds - Part 3					2,602,416	2,580,000	4,340	XXX
8399999	Total - Bonds					2,602,416	2,580,000	4,340	XXX
9999999	Total - Bonds, Preferred and Common Stocks					2,602,416	XXX	4,340	XXX

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

QE04

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization) / Accretion	Other-Than-Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation and Administrative Symbol/Market Indicator (a)
Bonds - U.S. Government																					
36202E	UM 9		06/01/2019	MBS PAYMENT		139	139	139	139				0		139		0	0	3	07/20/2038	1
36205K	WE 8		06/01/2019	MBS PAYMENT		830	830	827	830								0	0	26	05/15/2024	1
36208C	7L 5		06/01/2019	MBS PAYMENT		237	237	241	237				0		237		0	0	7	07/15/2027	1
912810	ED 6		04/18/2019	J.P. MORGAN		559,904	550,000	590,004	552,141		(1,040)		(1,040)		551,101		8,803	8,803	30,491	08/15/2019	1
0599999 Total - Bonds - U.S. Government						561,110	551,206	591,211	553,347	0	(1,040)	0	(1,040)	0	552,307	0	8,803	8,803	30,527	XXX	XXX
Bonds - U.S. Special Revenue and Special Assessment																					
3128K6	7K 0		06/01/2019	MBS PAYMENT		1,540	1,540	1,556	1,541				0		1,540		0	0	42	07/01/2035	1
3128KV	MN 2		06/01/2019	MBS PAYMENT		361	361	364	361				0		361		0	0	9	08/01/2037	1
3128M4	4Q 3		06/01/2019	MBS PAYMENT		3,341	3,341	3,291	3,338		3		3		3,341		0	0	72	08/01/2037	1
3128M5	UZ 1		06/01/2019	MBS PAYMENT		499	499	496	499				0		499		0	0	12	02/01/2038	1
3128M7	XB 7		06/01/2019	MBS PAYMENT		3,263	3,263	3,465	3,271		(9)		(9)		3,263		0	0	68	01/01/2040	1
3128M8	AZ 7		06/01/2019	MBS PAYMENT		5,309	5,309	5,606	5,314		(6)		(6)		5,309		0	0	116	08/01/2040	1
3128ME	3F 6		06/01/2019	MBS PAYMENT		6,653	6,653	6,667	6,654		(1)		(1)		6,653		0	0	69	01/01/2032	1
3128ME	XR 7		06/17/2019	VARIOUS		118,958	116,970	122,855	122,270		(731)		(731)		121,539		(2,581)	(2,581)	1,896	01/01/2029	1
3128MJ	R3 6		06/01/2019	MBS PAYMENT		14,428	14,428	15,147	14,452		(25)		(25)		14,428		0	0	183	09/01/2042	1
3128MJ	U3 2		06/01/2019	MBS PAYMENT		4,124	4,124	4,411	4,136		(13)		(13)		4,124		0	0	71	08/01/2044	1
3128MJ	X4 7		06/01/2019	MBS PAYMENT		5,582	5,582	5,827	5,592		(10)		(10)		5,582		0	0	82	03/01/2046	1
3128MJ	X5 4		06/01/2019	MBS PAYMENT		6,932	6,932	7,440	6,956		(24)		(24)		6,932		0	0	119	03/01/2046	1
3128MJ	YM 6		06/01/2019	MBS PAYMENT		4,717	4,717	4,907	4,724		(7)		(7)		4,717		0	0	60	08/01/2046	1
3128MJ	ZH 6		06/01/2019	MBS PAYMENT		8,742	8,742	9,203	8,761		(19)		(19)		8,742		0	0	150	01/01/2047	1
3128MJ	ZM 5		06/01/2019	MBS PAYMENT		10,038	10,038	9,916	10,034		4		4		10,038		0	0	128	02/01/2047	1
3128MM	VZ 3		06/01/2019	MBS PAYMENT		8,657	8,657	8,678	8,659		(1)		(1)		8,657		0	0	93	02/01/2032	1
3128MM	WJ 8		06/01/2019	MBS PAYMENT		22,094	22,094	23,109	22,165		(71)		(71)		22,094		0	0	332	06/01/2032	1
3128MM	WS 8		06/01/2019	MBS PAYMENT		12,859	12,859	13,164	12,879		(20)		(20)		12,859		0	0	181	08/01/2032	1
3128NJ	G9 4		06/01/2019	MBS PAYMENT		9,389	9,389	9,800	9,646		(256)		(256)		9,389		0	0	199	04/01/2039	1
3128PQ	ZH 7		06/01/2019	MBS PAYMENT		2,277	2,277	2,317	2,281		(5)		(5)		2,277		0	0	38	02/01/2025	1
3128PY	JD 7		06/01/2019	MBS PAYMENT		7,257	7,257	7,504	7,276		(19)		(19)		7,257		0	0	92	03/01/2027	1
3128QJ	UC 8		06/01/2019	VARIOUS		10,764	10,764	10,868	10,765		(1)		(1)		10,764		0	0	154	01/01/2037	1
31292H	VU 5		06/01/2019	MBS PAYMENT		1,975	1,975	2,010	1,977		(2)		(2)		1,975		0	0	46	04/01/2033	1
31292L	KQ 7		06/01/2019	MBS PAYMENT		4,179	4,179	4,181	4,179				0		4,179		0	0	65	04/01/2042	1
31292L	L6 0		06/01/2019	MBS PAYMENT		3,090	3,090	3,169	3,092		(2)		(2)		3,090		0	0	44	05/01/2042	1
312940	2H 1		06/01/2019	MBS PAYMENT		2,022	2,022	2,076	2,024		(2)		(2)		2,022		0	0	40	07/01/2040	1
312941	NJ 2		06/01/2019	MBS PAYMENT		4,583	4,583	4,822	4,593		(10)		(10)		4,583		0	0	93	07/01/2040	1
312942	NF 8		06/01/2019	MBS PAYMENT		2,362	2,362	2,443	2,366		(4)		(4)		2,362		0	0	40	09/01/2040	1
31294M	DW 8		06/01/2019	MBS PAYMENT		4,458	4,458	4,341	4,450		9		9		4,458		0	0	56	01/01/2026	1
31296M	PA 1		06/01/2019	MBS PAYMENT		8,348	8,348	8,259	8,344		4		4		8,348		0	0	187	09/01/2033	1
31296Q	4R 8		06/01/2019	MBS PAYMENT		1,216	1,216	1,240	1,216		(1)		(1)		1,216		0	0	29	11/01/2033	1
3132GL	VR 7		06/01/2019	MBS PAYMENT		3,840	3,840	3,839	3,840				0		3,840		0	0	63	01/01/2042	1
3132J2	5H 2		06/01/2019	MBS PAYMENT		4,014	4,014	4,168	4,022		(9)		(9)		4,014		0	0	49	07/01/2033	1
31335A	QK 7		06/01/2019	MBS PAYMENT		6,614	6,614	6,960	6,626		(13)		(13)		6,614		0	0	99	01/01/2044	1
31335A	UL 0		06/01/2019	MBS PAYMENT		2,158	2,158	2,308	2,165		(7)		(7)		2,158		0	0	37	02/01/2046	1
31335H	5U 3		06/01/2019	MBS PAYMENT		2,120	2,120	2,179	2,127		(7)		(7)		2,120		0	0	48	10/01/2024	1
31371H	B6 4		06/01/2019	MBS PAYMENT		1,350	1,350	1,335	1,350		1		1		1,350		0	0	34	12/01/2028	1
31371K	A4 3		06/01/2019	MBS PAYMENT		89	89	89	89				0		89		0	0	2	07/01/2031	1
31371M	CW 0		06/01/2019	MBS PAYMENT		4,082	4,082	4,163	4,085		(3)		(3)		4,082		0	0	90	07/01/2035	1
3138AN	CG 1		06/01/2019	MBS PAYMENT		2,834	2,834	2,971	2,837		(3)		(3)		2,834		0	0	48	08/01/2041	1
3138AN	YU 1		06/01/2019	MBS PAYMENT		3,162	3,162	3,350	3,170		(8)		(8)		3,162		0	0	59	08/01/2041	1
3138AV	TB 1		06/01/2019	MBS PAYMENT		1,612	1,612	1,682	1,615		(3)		(3)		1,612		0	0	27	11/01/2041	1
3138AW	RQ 8		06/01/2019	MBS PAYMENT		2,315	2,315	2,492	2,326		(11)		(11)		2,315		0	0	43	11/01/2041	1
3138E0	SF 7		06/01/2019	MBS PAYMENT		5,152	5,152	5,310	5,164		(12)		(12)		5,152		0	0	64	12/01/2026	1
3138EG	HX 5		06/01/2019	MBS PAYMENT		2,502	2,502	2,578	2,506		(4)		(4)		2,502		0	0	42	04/01/2041	1
3138EH	US 9		06/01/2019	MBS PAYMENT		5,842	5,842	6,111	5,852		(10)		(10)		5,842		0	0	102	03/01/2042	1
3138EJ	3Y 2		06/01/2019	MBS PAYMENT		2,720	2,720	2,812	2,725		(5)		(5)		2,720		0	0	39	11/01/2042	1

QE05

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization) / Accretion	Other-Than-Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation and Administrative Symbol/Market Indicator (a)
3138EJ	RA 8	FN AL2280	06/01/2019	MBS PAYMENT		3,785	3,785	4,031	3,798		(13)		(13)		3,785			.0	.71	09/01/2042	1
3138EK	FB 6	FN AL2861	06/01/2019	MBS PAYMENT		5,488	5,488	5,637	5,495		(7)		(7)		5,488			.0	.78	12/01/2042	1
3138EL	HJ 7	FN AL2932	06/01/2019	MBS PAYMENT		1,661	1,661	1,746	1,665		(4)		(4)		1,661			.0	.28	07/01/2042	1
3138EM	YW 9	FN AL3424	06/01/2019	MBS PAYMENT		4,916	4,916	5,160	4,926		(10)		(10)		4,916			.0	.84	01/01/2043	1
3138EN	ZJ 4	FN AL8876	06/01/2019	MBS PAYMENT		5,021	5,021	5,225	5,028		(8)		(8)		5,021			.0	.64	10/01/2044	1
3138ER	AE 2	FN A00904	06/01/2019	MBS PAYMENT		4,231	4,231	4,349	4,235		(3)		(3)		4,231			.0	.77	04/01/2042	1
3138ES	SX 4	FN A04133	06/01/2019	MBS PAYMENT		7,014	7,014	7,007	7,014				.0		7,014			.0	.102	06/01/2042	1
3138ET	2E 5	FN A04372	06/01/2019	MBS PAYMENT		7,810	7,810	7,802	7,810		1		.1		7,810			.0	.83	11/01/2027	1
3138EU	L6 4	FN AR3048	06/01/2019	MBS PAYMENT		4,158	4,158	4,125	4,156		2		.2		4,158			.0	.45	01/01/2028	1
3138EV	CR 0	FN AR6379	06/01/2019	MBS PAYMENT		7,299	7,299	7,555	7,310		(11)		(11)		7,299			.0	.90	02/01/2043	1
3138EW	SU 1	FN AR8630	06/01/2019	MBS PAYMENT		2,665	2,665	2,746	2,670		(4)		(4)		2,665			.0	.36	04/01/2043	1
3138EX	HW 3	FN AS0244	06/01/2019	MBS PAYMENT		4,672	4,672	4,833	4,687		(16)		(16)		4,672			.0	.75	08/01/2043	1
3138EY	KR 0	FN AS0303	06/01/2019	MBS PAYMENT		4,841	4,841	4,825	4,840		1		.1		4,841			.0	.61	08/01/2043	1
3138EZ	MT 4	FN AS0369	06/01/2019	MBS PAYMENT		4,965	4,965	5,320	4,977		(12)		(12)		4,965			.0	.89	09/01/2043	1
3138F0	FR 3	FN AS1075	06/01/2019	MBS PAYMENT		4,387	4,387	4,521	4,391		(4)		(4)		4,387			.0	.51	11/01/2043	1
3138F1	WT 0	FN AS1557	06/01/2019	MBS PAYMENT		8,660	8,660	9,198	8,684		(24)		(24)		8,660			.0	.149	01/01/2044	1
3138F2	UK 9	FN AS2385	06/01/2019	MBS PAYMENT		2,895	2,895	3,057	2,897		(2)		(2)		2,895			.0	.55	05/01/2044	1
3138F3	ZJ 1	FN AS2444	06/01/2019	MBS PAYMENT		8,165	8,165	8,457	8,177		(11)		(11)		8,165			.0	.121	06/01/2045	1
3138F4	DN 1	FN AS6408	06/01/2019	MBS PAYMENT		4,267	4,267	4,513	4,277		(10)		(10)		4,267			.0	.63	01/01/2046	1
3138F5	HY 3	FN AS6546	06/17/2019	VARIOUS		129,773	129,290	133,431	132,809		(352)		(352)		132,457		(2,684)	(2,684)	1,754	01/01/2031	1
3138F6	PC 6	FN AS8518	06/01/2019	MBS PAYMENT		4,952	4,952	4,927	4,952		1		.1		4,952			.0	.64	12/01/2046	1
3138F7	QE 1	FN AS8552	06/01/2019	MBS PAYMENT		8,023	8,023	8,207	8,031		(9)		(9)		8,023			.0	.100	12/01/2036	1
3138F8	KY 6	FN AT0310	06/01/2019	MBS PAYMENT		12,338	12,338	13,140	12,377		(40)		(40)		12,338			.0	.184	03/01/2043	1
3138F9	FK 8	FN AT9169	06/01/2019	MBS PAYMENT		10,193	10,193	10,133	10,189		4		.4		10,193			.0	.110	07/01/2028	1
3138FA	ZY 5	FN AU0567	06/01/2019	MBS PAYMENT		2,837	2,837	2,809	2,835		1		.1		2,837			.0	.42	08/01/2043	1
3138FB	T2 8	FN AU1628	06/01/2019	MBS PAYMENT		4,574	4,574	4,484	4,570		3		.3		4,574			.0	.59	07/01/2043	1
3138FC	3A 2	FN AU2592	06/01/2019	MBS PAYMENT		8,333	8,333	8,632	8,347		(14)		(14)		8,333			.0	.123	08/01/2043	1
3138FD	XM 9	FN AU4283	06/01/2019	MBS PAYMENT		5,308	5,308	5,326	5,309		(1)		(1)		5,308			.0	.81	09/01/2043	1
3138FE	3S 1	FN AX5308	06/01/2019	MBS PAYMENT		2,410	2,410	2,529	2,416		(6)		(6)		2,410			.0	.35	01/01/2042	1
3138FF	UV 5	FN AY4204	06/01/2019	MBS PAYMENT		5,618	5,618	5,803	5,626		(8)		(8)		5,618			.0	.81	05/01/2045	1
3138FG	LV 0	FNR 2005-123 PG	06/01/2019	MBS PAYMENT		13,233	13,233	12,837	13,224		9		.9		13,233			.0	.309	01/25/2036	1
31400Y	3Q 7	FN 702007	06/01/2019	MBS PAYMENT		389	389	398	389				.0		389			.0	.8	05/01/2033	1
31404V	4L 9	FN 780327	06/01/2019	MBS PAYMENT		1,555	1,555	1,567	1,555				.0		1,555			.0	.32	08/15/2019	1
31404W	UE 4	FN 780981	06/01/2019	VARIOUS		1,644	1,644	1,641	1,638		6		.6		1,644			.0	.30	06/01/2019	1
31406U	HH 4	FN 820232	06/01/2019	MBS PAYMENT		1,618	1,618	1,642	1,620		(2)		(2)		1,618			.0	.42	06/01/2035	1
31407B	BK 4	FN 825442	06/01/2019	MBS PAYMENT		270	270	273	270				.0		270			.0	.6	05/01/2035	1
31409Y	UL 9	FN 882687	06/01/2019	MBS PAYMENT		220	220	218	220				.0		220			.0	.6	06/01/2036	1
3140FP	C9 8	FN BE3695	06/01/2019	MBS PAYMENT		18,931	18,931	18,833	18,928		3		.3		18,931			.0	.285	06/01/2047	1
3140HB	FK 9	FN BJ9169	06/01/2019	MBS PAYMENT		27,582	27,582	28,106	27,606		(24)		(24)		27,582			.0	.479	05/01/2048	1
3140HB	GZ 5	FN BJ9215	06/01/2019	MBS PAYMENT		7,004	7,004	7,130	7,011		(6)		(6)		7,004			.0	.119	06/01/2048	1
3140J7	T5 4	FN BM3271	06/01/2019	MBS PAYMENT		16,899	16,899	17,179	16,917		(18)		(18)		16,899			.0	.218	12/01/2032	1
3140J8	HZ 9	FN BM3847	06/01/2019	MBS PAYMENT		4,910	4,910	5,028	4,913		(3)		(3)		4,910			.0	.82	05/01/2048	1
3140Q7	2P 1	FN CA0781	06/01/2019	MBS PAYMENT		18,473	18,473	18,843	18,497		(24)		(24)		18,473			.0	.222	11/01/2032	1
31410U	KA 9	FN 897689	06/01/2019	MBS PAYMENT		8,634	8,634	8,443	8,631		4		.4		8,634			.0	.161	06/01/2037	1
31413R	2P 0	FN 953582	06/01/2019	MBS PAYMENT		172	172	181	172				.0		172			.0	.4	12/01/2037	1
31416J	ZM 6	FN AA1647	06/01/2019	MBS PAYMENT		253	253	261	253				.0		253			.0	.5	02/01/2039	1
31416M	5A 8	FN AA4440	06/01/2019	MBS PAYMENT		479	479	497	480		(1)		(1)		479			.0	.8	03/01/2039	1
31417C	JL 0	FN AB5666	06/01/2019	MBS PAYMENT		1,439	1,439	1,467	1,440		(1)		(1)		1,439			.0	.21	07/01/2042	1
31417C	KM 6	FN AB5699	06/01/2019	MBS PAYMENT		5,210	5,210	5,191	5,209		1		.1		5,210			.0	.88	07/01/2042	1
31417C	VS 1	FN AB6024	06/01/2019	MBS PAYMENT		3,177	3,177	3,323	3,184		(6)		(6)		3,177			.0	.45	08/01/2042	1
31417D	TR 4	FN AB6859	06/01/2019	MBS PAYMENT		4,415	4,415	4,589	4,421		(6)		(6)		4,415			.0	.67	11/01/2042	1
31417E	MZ 1	FN AB7575	06/01/2019	MBS PAYMENT		5,621	5,621	5,601	5,620		1		.1		5,621			.0	.75	01/01/2043	1
31417E	N9 8	FN AB7615	06/01/2019	MBS PAYMENT		6,480	6,480	6,772	6,493		(13)		(13)		6,480			.0	.93	01/01/2043	1
31417F	3E 6	FN AB8896	06/01/2019	MBS PAYMENT		4,360	4,360	4,237	4,356		4		.4		4,360			.0	.56	04/01/2043	1

QE05.1

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For rei gn	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization) / Accretion	Other-Than- Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation and Admini- strative Symbol/ Market Indicator (a)
31417G 5A 0	FN AB9840.....		06/01/2019	MBS PAYMENT.....		4,440	4,440	4,654	4,447		(8)		(8)		4,440			.0	.68	07/01/2043	1.....
31417H B5 2	FN AB9959.....		06/01/2019	MBS PAYMENT.....		5,355	5,355	5,587	5,365		(9)		(9)		5,355			.0	.94	07/01/2043	1.....
31418C QB 3	FN MA3149.....		06/01/2019	MBS PAYMENT.....		9,618	9,618	9,985	9,635		(17)		(17)		9,618			.0	.163	10/01/2047	1.....
31418W CY 4	FN AD8186.....		06/01/2019	MBS PAYMENT.....		1,583	1,583	1,640	1,587		(4)		(4)		1,583			.0	.23	09/01/2025	1.....
31419E UD 9	FN AE4179.....		06/01/2019	MBS PAYMENT.....		3,124	3,124	3,234	3,133		(9)		(9)		3,124			.0	.45	10/01/2025	1.....
31419J SV 1	FN AE7731.....		06/01/2019	MBS PAYMENT.....		2,618	2,618	2,792	2,626		(8)		(8)		2,618			.0	.48	11/01/2040	1.....
3199999	Total - Bonds - U.S. Special Revenue and Special Assessments.....					821,388	818,917	843,156	828,652	.0	(2,000)	.0	(2,000)	.0	826,653	.0	(5,265)	(5,265)	12,569	XXX	XXX
Bonds - Industrial and Miscellaneous																					
02007M AD 2	ALLYA 2018-1 A2.....		06/15/2019	MBS PAYMENT.....		101,626	101,626	101,619	101,570		.56		.56		101,626			.0	.902	09/15/2020	1FE.....
02376A AA 7	AMER AIRLINE 17-2 AA PTT.....		04/15/2019	MBS PAYMENT.....		8,118	8,118	8,118	8,118				.0		8,118			.0	.136	04/15/2031	1FE.....
118230 AJ 0	BUCKEYE PARTNERS LP.....		05/13/2019	BARCLAYS AMERICAN.....		508,125	500,000	517,955	505,203		(1,020)		(1,020)		504,184		3,941	3,941	19,229	02/01/2021	2FE.....
263534 CL 1	E.I. DU PONT DE NEMOURS.....		04/05/2019	MILLENNIUM ADVISORS.....		497,675	500,000	495,000	495,516		.892		.892		496,408		1,267	1,267	4,797	05/01/2020	1FE.....
47215B AD 9	JCPL 2006-A A4.....		06/05/2019	MBS PAYMENT.....		73,191	73,191	73,126	73,147		.44		.44		73,191			.0	2,053	06/05/2023	1FE.....
594918 BQ 6	MICROSOFT CORP.....		06/17/2019	MILLENNIUM ADVISORS.....		347,729	350,000	348,954	349,295		.69		.69		349,364		(1,635)	(1,635)	6,047	08/08/2023	1FE.....
695156 AS 8	PACKAGING CORP OF AMERIC.....		06/27/2019	VARIOUS.....		339,830	340,000	339,636	339,760		.59		.59		339,819		10	10	4,452	12/15/2020	2FE.....
3899999	Total - Bonds - Industrial and Miscellaneous.....					1,876,294	1,872,935	1,884,408	1,872,609	.0	100	.0	100	.0	1,872,710	.0	3,583	3,583	37,616	XXX	XXX
8399997	Total - Bonds - Part 4.....					3,258,792	3,243,058	3,318,775	3,254,608	.0	(2,940)	.0	(2,940)	.0	3,251,670	.0	7,121	7,121	80,712	XXX	XXX
8399999	Total - Bonds.....					3,258,792	3,243,058	3,318,775	3,254,608	.0	(2,940)	.0	(2,940)	.0	3,251,670	.0	7,121	7,121	80,712	XXX	XXX
9999999	Total - Bonds, Preferred and Common Stocks.....					3,258,792	XXX	3,318,775	3,254,608	.0	(2,940)	.0	(2,940)	.0	3,251,670	.0	7,121	7,121	80,712	XXX	XXX

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

QE05.2

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

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

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

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

Sch. DL - Pt. 1
NONE

Sch. DL - Pt. 2
NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Open Depositories								
BANK OF AMERICA PROVIDENCE, RI.....					.....761,880	.....746,773	.....834,501	XXX
0199999. Total Open Depositories.....	XXX	XXX	.....0	.....0	.....761,880	.....746,773	.....834,501	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	.....0	.....0	.....761,880	.....746,773	.....834,501	XXX
0599999. Total Cash.....	XXX	XXX	.....0	.....0	.....761,880	.....746,773	.....834,501	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due & Accrued	9 Amount Received During Year
U.S. Government Bonds - Issuer Obligations								
	US TREASURY N/B.....		06/27/2019.....	1.250	08/31/2019.....	139,776	585	(560)
0199999	U.S. Government Bonds - Issuer Obligations.....					139,776	585	(560)
0599999	Total - U.S. Government Bonds.....					139,776	585	(560)
Total Bonds								
7799999	Subtotals - Issuer Obligations.....					139,776	585	(560)
8399999	Subtotals - Bonds.....					139,776	585	(560)
All Other Money Market Mutual Funds								
31607A 70 3	FIDELITY GOVERNMENT PORT-INS.....		06/27/2019.....	2.290		7,577	675	
8699999	Total - All Other Money Market Mutual Funds.....					7,577	675	0
8899999	Total - Cash Equivalents.....					147,353	1,260	(560)

QE13



SUPPLEMENT "A" TO SCHEDULE T

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

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

Physicians - Including Surgeons and Osteopaths

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama.....AL								
2. Alaska.....AK								
3. Arizona.....AZ								
4. Arkansas.....AR								
5. California.....CA								
6. Colorado.....CO								
7. Connecticut.....CT								
8. Delaware.....DE								
9. District of Columbia.....DC								
10. Florida.....FL								
11. Georgia.....GA								
12. Hawaii.....HI								
13. Idaho.....ID								
14. Illinois.....IL								
15. Indiana.....IN								
16. Iowa.....IA								
17. Kansas.....KS								
18. Kentucky.....KY								
19. Louisiana.....LA								
20. Maine.....ME								
21. Maryland.....MD								
22. Massachusetts.....MA								
23. Michigan.....MI								
24. Minnesota.....MN								
25. Mississippi.....MS								
26. Missouri.....MO								
27. Montana.....MT								
28. Nebraska.....NE								
29. Nevada.....NV								
30. New Hampshire.....NH								
31. New Jersey.....NJ								
32. New Mexico.....NM								
33. New York.....NY								
34. North Carolina.....NC								
35. North Dakota.....ND								
36. Ohio.....OH								
37. Oklahoma.....OK								
38. Oregon.....OR								
39. Pennsylvania.....PA								
40. Rhode Island.....RI	766,429	711,598	1,020,264	2	(1,534,909)	7,444,671	27	10,127,930
41. South Carolina.....SC								
42. South Dakota.....SD								
43. Tennessee.....TN								
44. Texas.....TX								
45. Utah.....UT								
46. Vermont.....VT								
47. Virginia.....VA								
48. Washington.....WA								
49. West Virginia.....WV								
50. Wisconsin.....WI								
51. Wyoming.....WY								
52. American Samoa.....AS								
53. Guam.....GU								
54. Puerto Rico.....PR								
55. US Virgin Islands.....VI								
56. Northern Mariana Islands.....MP								
57. Canada.....CAN								
58. Aggregate Other Alien.....OT	0	0	0	0	0	0	0	0
59. Totals.....	766,429	711,598	1,020,264	2	(1,534,909)	7,444,671	27	10,127,930

DETAILS OF WRITE-INS

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



SUPPLEMENT "A" TO SCHEDULE T

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

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

Hospitals

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama.....AL								
2. Alaska.....AK								
3. Arizona.....AZ								
4. Arkansas.....AR								
5. California.....CA								
6. Colorado.....CO								
7. Connecticut.....CT								
8. Delaware.....DE								
9. District of Columbia.....DC								
10. Florida.....FL								
11. Georgia.....GA								
12. Hawaii.....HI								
13. Idaho.....ID								
14. Illinois.....IL								
15. Indiana.....IN								
16. Iowa.....IA								
17. Kansas.....KS								
18. Kentucky.....KY								
19. Louisiana.....LA								
20. Maine.....ME								
21. Maryland.....MD								
22. Massachusetts.....MA								
23. Michigan.....MI								
24. Minnesota.....MN								
25. Mississippi.....MS								
26. Missouri.....MO								
27. Montana.....MT								
28. Nebraska.....NE								
29. Nevada.....NV								
30. New Hampshire.....NH								
31. New Jersey.....NJ								
32. New Mexico.....NM								
33. New York.....NY								
34. North Carolina.....NC								
35. North Dakota.....ND								
36. Ohio.....OH								
37. Oklahoma.....OK								
38. Oregon.....OR								
39. Pennsylvania.....PA								
40. Rhode Island.....RI	111,577	115,631			(220,714)	1,785,000	13	1,652,251
41. South Carolina.....SC								
42. South Dakota.....SD								
43. Tennessee.....TN								
44. Texas.....TX								
45. Utah.....UT								
46. Vermont.....VT								
47. Virginia.....VA								
48. Washington.....WA								
49. West Virginia.....WV								
50. Wisconsin.....WI								
51. Wyoming.....WY								
52. American Samoa.....AS								
53. Guam.....GU								
54. Puerto Rico.....PR								
55. US Virgin Islands.....VI								
56. Northern Mariana Islands.....MP								
57. Canada.....CAN								
58. Aggregate Other Alien.....OT	0	0	0	0	0	0	0	0
59. Totals.....	111,577	115,631	0	0	(220,714)	1,785,000	13	1,652,251

DETAILS OF WRITE-INS

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

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

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

**Overflow Page
NONE**