

# **ANNUAL STATEMENT**

For the Year Ended December 31, 2013 of the Condition and Affairs of the

# MedMal Direct Insurance Company NAIC Company Code..... 13793 Employer's ID Number

NAIC Group Code ,	NAIC Company Code.	13793	Employer's ID Number 27-2813188	
(Current Period) (Prior Pe Organized under the Laws of Florida	State of Domicile or Po	ort of Entry Florida	Country of Domicile US	
Incorporated/Organized June 14, 20		Commenced Business	•	
Statutory Home Office	245 Riverside Avenue, Suite 5			
Statutory Frome Smoo		vn, State, Country and Zip Code)	. 00 02202	
Main Administrative Office	245 Riverside Avenue, Suite 5	50 Jacksonville FL	. US 32202 904-482-4068	
		wn, State, Country and Zip Code)	(Area Code) (Telephone Nui	mber
Mail Address	245 Riverside Avenue, Suite 55			
Drimary Location of Books and Books	(Street and Number or P. O. Box)	(City or Town, State, Country and		
Primary Location of Books and Records		vn, State, Country and Zip Code)	. US 322U2 904-402-4000 (Area Code) (Telephone Nui	mher
Internet Web Site Address	www.mymedmal.com	vii, otato, oountry una zip oouoj	(rica code) (releptione was	11001
Statutory Statement Contact	Michael John Wallace		904-482-4068	
•	(Name)		(Area Code) (Telephone Number) (Exter	nsion
	mike@mymedmal.com		904-354-4813	
	(E-Mail Address)	0500	(Fax Number)	
		CERS		
Name	Title	Name	Title	
•	Chief Executive Officer //ice President and Chief Financial	<ol> <li>Timothy Robert Bone</li> <li>Carter Byrd Bryan</li> </ol>	President Chairman	
	Officer	4. Carter byla bryan	Ghairnan	
	OT	HER		
	DIRECTORS (	OR TRUSTEES		
Christopher McNeill Ball F Michael John Wallace	Philip Butler Ball	Timothy Robert Bone	Carter Byrd Bryan	
wiichael John Wallace				
State of Florida County of Duval				
stated above, all of the herein described asset herein stated, and that this statement, togethe of all the assets and liabilities and of the condi therefrom for the period ended, and have been	ts were the absolute property of the sale with related exhibits, schedules and dition and affairs of the said reporting ernompleted in accordance with the NA may differ; or, (2) that state rules or re	id reporting entity, free and clear explanations therein contained, hitly as of the reporting period st NC Annual Statement Instruction gulations require differences in	annexed or referred to, is a full and true statemen ated above, and of its income and deductions as and Accounting Practices and Procedures reporting not related to accounting practices and	

	(Signature) Philip Butler Ball		(Signature) Timothy Robert E			(Signature) el John Wallace
	(Printed Name)     Chief Executive Officer		(Printed Na     President	me)	,	(Printed Name) and Chief Financial Officer
	(Title)		(Title)			(Title)
Subscribed ar	nd sworn to before me		a. Is this a	ın original filing?		Yes [X] No [ ]
This	day of	2014	b. If no	<ol> <li>State the amendment</li> <li>Date filed</li> </ol>	number	
				3. Number of pages attac	ched	-

			Current Year		Prior Year
		1	2 Nonadmitted	3 Net Admitted Assets	4 Net
	2 4 (24 44 2)	Assets	Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds (Schedule D).	14,199,163		14,199,163	9,529,926
2.	Stocks (Schedule D):	074 074		074 074	
	2.1 Preferred stocks			271,071	
	2.2 Common stocks	2,009,644		2,009,644	1,650,428
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				
	3.2 Other than first liens			0	
4.	Real estate (Schedule A):				
	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 (\$2,944,539, Schedule E-Part 1), cash equivalents (\$0, Schedule E-Part 2) and short-term investments (\$0, Schedule DA)			2,944,539	3,476,204
6.	Contract loans (including \$0 premium notes)			0	
7.	Derivatives (Schedule DB)			0	
8.	Other invested assets (Schedule BA)			0	
9.	Receivables for securities			0	
10.	Securities lending reinvested collateral assets (Schedule DL)			0	
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	19,424,418	0	19,424,418	14,656,558
13.	Title plants less \$0 charged off (for Title insurers only)			0	
14.	Investment income due and accrued			76,899	16,873
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	2,746,301		2,746,301	1,883,164
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)			0	
	15.3 Accrued retrospective premiums			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				
17.	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon				
18.2	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$0)				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
23. 24.	Health care (\$0) and other amounts receivable				
24. 25.	Aggregate write-ins for other than invested assets				
	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)				
	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
28.	TOTALS (Lines 26 and 27)		311,119	22,934,956	17,468,994
		OF WRITE-INS			
				0	
1198	Summary of remaining write-ins for Line 11 from overflow page		0	0	0
	Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)				
	Prepaid expenses.			0	
	Security deposits				
	Summary of remaining write-ins for Line 25 from overflow page	·		0	,
	Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)			18,087	

# Annual Statement for the year 2013 of the **MedMal Direct Insurance Company** LIABILITIES, SURPLUS AND OTHER FUNDS

		Current Year	Prior Year
1.	Losses (Part 2A, Line 35, Column 8)	5,972,774	3,032,863
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)	1,615,757	896,208
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)	585,855	144,248
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	40,965	32,622
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))	3,409	
7.2	Net deferred tax liability		
8.	Borrowed money \$0 and interest thereon \$0.		
9.	Unearned premiums (Part 1A, Line 38, Column 5) (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)	4 708 968	3 729 733
10.	Advance premium		
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 (Schedule F, Part 3, Column 19)		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$0 certified) (Schedule F, Part 8)		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		
20.	Derivatives		
21.	Payable for securities		
22.	Payable for securities lending		
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$0 and interest thereon \$0.		
25.	Aggregate write-ins for liabilities	0	0
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)	12,484,473	8,547,915
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)		
29.	Aggregate write-ins for special surplus funds	0	0
30.	Common capital stock	4,750,180	9,500,120
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.	7,149,820	1,199,880
35.	Unassigned funds (surplus)	(1,449,517)	(1,778,921)
36.	Less treasury stock, at cost:		
	36.10.000 shares common (value included in Line 30 \$0)		
	36.20.000 shares preferred (value included in Line 31 \$0)		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	10,450,483	8,921,079
	TOTALS (Page 2, Line 28, Col. 3)		
	DETAILS OF WRITE-INS	<u> </u>	<u> </u>
2501.			
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)	0	0
2901.			
	Summary of remaining write-ins for Line 29 from overflow page		
	Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)		
	Summary of remaining write-ins for Line 32 from overflow page		
	Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above)		

# Annual Statement for the year 2013 of the MedMal Direct Insurance Company STATEMENT OF INCOME

	STATEMENT OF INCOME		
	UNDERWRITING INCOME	1 Current Year	2 Prior Year
1.	Premiums earned (Part 1, Line 35, Column 4)	-	6,268,821
	DEDUCTIONS	, ,	, ,
2.	Losses incurred (Part 2, Line 35, Column 7)	3,668,911	2,821,216
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		1,252,874
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)		3,337,012
5.	Aggregate write-ins for underwriting deductions		0
6.	Total underwriting deductions (Lines 2 through 5)		
7.	Net income of protected cells		
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	107,120	(1,142,281)
0	Net investment income earned (Exhibit of Net Investment Income, Line 17)	350 634	225 220
9. 10.	Net realized capital gains (losses) less capital gains tax of \$0 (Exhibit of Capital Gains (Losses))		
11.	Net investment gain (loss) (Lines 9 + 10)		
11.	OTHER INCOME	001,000	
12.	Net gain (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		
14.	Aggregate write-ins for miscellaneous income	0	18,215
15.	Total other income (Lines 12 through 14)	0	18,215
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign		
	income taxes (Lines 8 + 11 + 15)		(577,768
	Dividends to policyholders		
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign	700 455	(577.700)
10	income taxes (Line 16 minus Line 17)		
19. 20.	Federal and foreign income taxes incurred  Net income (Line 18 minus Line 19) (to Line 22)	i i	
20.	CAPITAL AND SURPLUS ACCOUNT	173,040	(377,700
		0.004.070	10 - 0 -
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)		
22.	Net income (from Line 20)		•
23.	Net transfers (to) from Protected Cell accounts		/20 545
24.			
25. 26.	Change in net unrealized foreign exchange capital gain (loss)		
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3)	` '	
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
	Change in surplus notes		
30.	Surplus (contributed to) withdrawn from protected cells		
	Cumulative effect of changes in accounting principles		
	Capital changes:		
	32.1 Paid in	120	2,500,120
	32.2 Transferred from surplus (Stock Dividend)		
	32.3 Transferred to surplus	(4,750,060)	
33.	Surplus adjustments:		
	33.1 Paid in	5,949,940	1,199,880
	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 (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
37.	Aggregate write-ins for gains and losses in surplus		
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37)	i i	
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	10,450,482	8,921,079
0501	DETAILS OF WRITE-INS		
	Summary of remaining write-ins for Line 5 from overflow page		0
	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)		
	Rental income		
1403.			
	Summary of remaining write-ins for Line 14 from overflow page		
	Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)		
	Summary of remaining write-ins for Line 37 from overflow page		
	Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above)		

	CASH FLOW		
		1 Current Year	2 Prior Year
	CASH FROM OPERATIONS		
1. F	Premiums collected net of reinsurance	9,609,675	6,031,264
2. 1	Net investment income		243,620
3. 1	Miscellaneous income		18,215
4.	Fotal (Lines 1 through 3)	9,923,953	6,293,099
5. E	Benefit and loss related payments	729,000	893,000
6. I	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. (	Commissions, expenses paid and aggregate write-ins for deductions	4,587,459	3,966,763
8. I	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)		
10.	Fotal (Lines 5 through 9)		4,859,763
11. 1	Net cash from operations (Line 4 minus Line 10)	4,595,494	1,433,336
	CASH FROM INVESTMENTS		
12. F	Proceeds from investments sold, matured or repaid:		
•	2.1 Bonds		9,963,925
•	12.2 Stocks	6,651,072	1,792,685
,	12.3 Mortgage loans		
•	2.4 Real estate		
,	2.5 Other invested assets		
•	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
,	2.7 Miscellaneous proceeds		1,150,579
•	12.8 Total investment proceeds (Lines 12.1 to 12.7)		12,907,189
13. (	Cost of investments acquired (long-term only):		
•	3.1 Bonds		15,114,102
•	3.2 Stocks		2,568,409
•	13.3 Mortgage loans		
•	3.4 Real estate		
•	3.5 Other invested assets		
•	3.6 Miscellaneous applications		
•	3.7 Total investments acquired (Lines 13.1 to 13.6)		17,682,511
14. 1	Net increase (decrease) in contract loans and premium notes		
15. I	Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14)	(6,348,027)	(4,775,322
	CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. (	Cash provided (applied):		
	6.1 Surplus notes, capital notes		
•	6.2 Capital and paid in surplus, less treasury stock		3,700,000
	6.3 Borrowed funds		
,	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
,	6.5 Dividends to stockholders		
,	6.6 Other cash provided (applied)		(162,978
17. 1	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)		3,537,022
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
	Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	(531,665)	195,036
	Cash, cash equivalents and short-term investments:		,
	9.1 Beginning of year		3,281,168
	9.2 End of year (Line 18 plus Line 19.1)		

PART 1 - PREMIUMS EARNED

	17	KI I-PKEIVIIOIVIS E		-	
		1 Net Premiums Written per	2 Unearned Premiums December 31 Prior Year- per Col. 3,	3 Unearned Premiums December 31 Current Year- per Col. 5,	4 Premiums Earned During Year
	Line of Business	Column 6, Part 1B	Last Year's Part 1	Part 1A	(Cols. 1 + 2 - 3)
1.	Fire				0
2.	Allied lines				0
3.	Farmowners multiple peril				0
4.	Homeowners multiple peril				0
5.	Commercial multiple peril				0
6.	Mortgage guaranty				0
8.	Ocean marine				0
9.	Inland marine				0
10.	Financial guaranty				0
11.1	Medical professional liability - occurrence				
11.2	Medical professional liability - claims-made			4,708,968	•
12.	Earthquake				
13.	Group accident and health				
	·				
14.	Credit accident and health (group and individual)				
15.	Other accident and health				
16.	Workers' compensation				0
17.1	Other liability - occurrence				0
17.2	Other liability - claims-made				0
17.3	Excess workers' compensation				0
18.1	Products liability - occurrence				0
18.2	Products liability - claims-made				0
19.1, 19.2	Private passenger auto liability				0
19.3, 19.4	Commercial auto liability				0
21.	Auto physical damage				0
22.	Aircraft (all perils)				0
23.	Fidelity				0
24.	Surety				0
26.	Burglary and theft				0
27.	Boiler and machinery				0
28.	Credit				0
29.	International				
30.	Warranty				
31.	Reinsurance - nonproportional assumed property				0
					0
32.	Reinsurance - nonproportional assumed liability				
33.	Reinsurance - nonproportional assumed financial lines				0
34.	Aggregate write-ins for other lines of business				
35.	TOTALS			4,708,968	9,532,989
		DETAILS OF WRITE-IN	IS		
3401.					0
3402.					0
3403.					0
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above)	0	0	0	0

# PART 1A - RECAPITULATION OF ALL PREMIUMS

		Amount Unearned (Running One Year or Less from Date	2 Amount Unearned (Running More Than One Year from	3 Earned But	4 Reserve for Rate Credits and Retrospective Adjustments Based	5 Total Reserve for Unearned Premiums
	Line of Business	of Policy) (a)	Date of Policy) (a)	Unbilled Premium	on Experience	Cols. 1 + 2 + 3 + 4
1.	Fire					0
2.	Allied lines					0
3.	Farmowners multiple peril					0
4.	Homeowners multiple peril					0
5.	Commercial multiple peril					0
6.	Mortgage guaranty					0
8.	Ocean marine					0
9.	Inland marine					0
10.	Financial guaranty					0
11.1	Medical professional liability - occurrence					0
11.2	Medical professional liability - claims-made	4,242,501	466,467			4,708,968
12.	Earthquake					0
13.	Group accident and health					0
14.	Credit accident and health (group and individual)					0
15.	Other accident and health					0
16.	Workers' compensation					0
17.1	Other liability - occurrence					0
17.2	Other liability - claims-made					0
17.3	Excess workers' compensation					0
18.1	Products liability - occurrence					0
18.2	Products liability - claims-made					0
19.1, 19.2	Private passenger auto liability					0
	Commercial auto liability					0
21.	Auto physical damage					0
22.	Aircraft (all perils)					0
23.	Fidelity					0
24.	Surety					0
26.	Burglary and theft					0
27.	Boiler and machinery					0
28.	Credit					0
29.	International					0
30.	Warranty					0
31.	Reinsurance - nonproportional assumed property					0
32.	Reinsurance - nonproportional assumed liability					
33.	Reinsurance - nonproportional assumed financial lines					0
34.	Aggregate write-ins for other lines of business					0
35.	TOTALS			0	0	4,708,968
36.	Accrued retrospective premiums based on experience					
37.	Earned but unbilled premiums					0
38.	Balance (sum of Lines 35 through 37)					4,708,968
		DETAILS OF V	VRITE-INS		<u> </u>	
3401.						0
3402.						0
3403.						0
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0

<sup>3499.</sup> Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above)... (a) State here basis of computation used in each case:

### **PART 1B - PREMIUMS WRITTEN**

		ART 1B - PREI	Reinsurand		Reinsura	nce Ceded	6
		Direct	2	3	4	5	Net Premiums Written
	Line of Business	Business (a)	From Affiliates	From Non-Affiliates	To Affiliates	To Non-Affiliates	(Cols. 1 + 2 + 3 - 4 - 5)
1. F	Fire						0
2. A	Allied lines						0
							0
							0
							0
							0
							0
	Financial guaranty					11,391	
	·						
	Medical professional liability - claims-made						10,233,094
	Earthquake						
	·						0
	Credit accident and health (group and individual)						0
	Other accident and health						
	Norkers' compensation						
17.1 C	Other liability - occurrence						0
17.2 C	Other liability - claims-made						0
17.3 E	Excess workers' compensation						
18.1 P	Products liability - occurrence						
18.2 P	Products liability - claims-made						0
19.1, 19.2 P	Private passenger auto liability						0
19.3, 19.4 C	Commercial auto liability						C
21. A	Auto physical damage						0
22. A	Aircraft (all perils)						
23. F	-idelity						0
24. S	Surety						
26. B	Burglary and theft						0
27. B	Boiler and machinery						(
28. C	Credit						
29. Ir	nternational						
	Reinsurance - nonproportional assumed property						 
	Reinsurance - nonproportional assumed liability						
	Aggregate write-ins for other lines of business		0	0	0	0	
							10 512 224
აე. I	TOTALS		F WRITE-INS	U	0	428,250	10,512,224
3401							(
3402							
3403							
	Summary of remaining write-ins for Line 34 from overflow page.	0	0	0	0	0	
	Fotals (Lines 3401 thru 3403 plus 3498) (Line 34 above)					0	

<sup>(</sup>a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [ ] No [X]

If yes: 1. The amount of such installment premiums  $\$  .......0.

<sup>2.</sup> Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$.......0.

# **UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2 - LOSSES PAID AND INCURRED

1				oon Colunge		5	6	7	0
		1 Direct	Losses Paid 2  Reinsurance	3 Reinsurance	4  Net Payments	Net Losses Unpaid Current Year	Net Losses Unpaid	Losses Incurred Current Year	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned
4	Line of Business	Business	Assumed	Recovered	(Cols. 1 + 2 - 3)	(Part 2A, Col. 8)	Prior Year	(Cols. 4 + 5 - 6)	(Col. 4, Part 1)
1.	Fire					J		0	0.0
2.	Farmowners multiple peril								0.0
3.									
4.	Homeowners multiple peril							0	0.0
5.	Commercial multiple peril								
0.	Mortgage guaranty  Ocean marine								0.0
8.								0	0.0
9.	Inland marine							0	0.0
10.	Financial guaranty					007.700	400.774	118,929	0.0
11.1		700,000				287,700	168,771		42.6
11.2	Medical professional liability - claims-made	729,000			729,000	5,685,074	2,864,092	3,549,982	38.4
12.	Earthquake							0	
13.	Group accident and health							0	0.0
14.	Credit accident and health (group and individual)							0	0.0
15.	Other accident and health							0	0.0
16.	Workers' compensation							0	0.0
17.1	Other liability - occurrence							0	0.0
17.2	Other liability - claims-made							0	0.0
17.3	Excess workers' compensation							0	0.0
18.1	Products liability - occurrence							0	0.0
18.2	Products liability - claims-made							0	0.0
19.1, 19.2	Private passenger auto liability							0	0.0
	Commercial auto liability					?		0	0.0
21.	Auto physical damage					<u> </u>		0	0.0
22.	Aircraft (all perils)							0	0.0
23.	Fidelity					?		0	0.0
24.	Surety					]		0	0.0
26.	Burglary and theft					]		0	0.0
27.	Boiler and machinery					]		0	0.0
28.	Credit							0	0.0
29.	International							0	0.0
30.	Warranty							0	0.0
31.	Reinsurance - nonproportional assumed property	XXX						0	0.0
32.	Reinsurance - nonproportional assumed liability	XXX						0	0.0
33.	Reinsurance - nonproportional assumed financial lines	XXX			.			0	0.0
34.	Aggregate write-ins for other lines of business	0	0			J  0	0	0	0.0
35.	TOTALS	729,000	0			5,972,774	3,032,863	3,668,911	38.5
0404	T	T	Т	DETAILS OF WRITE-		<u>,                                    </u>	Т	•	2.2
3401.						.		0	0.0
3402.						₹		0	0.0
3403.								0	0.0
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0		.	0	0	0	XXX
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above)	0	0		)  C	0	0	0	0.0

# **UNDERWRITING AND INVESTMENT EXHIBIT**

#### PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

				d Losses	D 1000 / (D000 / III)		Incurred But Not Reported		8	9
		1	2	3	4	5	6	7	$\dashv$	
	Line of Business	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excluding Incurred but not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire				0				0	
2.	Allied lines				0				0	
3.	Farmowners multiple peril				0					
4.	Homeowners multiple peril				0					
5.	Commercial multiple peril				0					
6.	Mortgage guaranty				0					
8.	Ocean marine				0					
9.	Inland marine				0				0	
10.	Financial guaranty				0					
11.1		250,000			250,000	37,700			287,700	135,411
11.2		2,574,500			2,574,500	3,110,574			5,685,074	1,480,346
12.	Earthquake				0				0	
13.	Group accident and health				0				(a)0	
14.	Credit accident and health (group and individual)				0				0	
15.	Other accident and health				0				(a)0	
16.	Workers' compensation				0					
17.1					0					
	Other liability - claims-made				0					
17.3	Excess workers' compensation				0					
	Products liability - occurrence				0					
	Products liability - claims-made				0					
	9.2 Private passenger auto liability				0					
	9.4 Commercial auto liability				0					
21.					0					
22.	Aircraft (all perils)				0					
23.	Fidelity				0					
24.	SuretyBurglary and theft				0					
26.					0					
27.	,				0					
28.	CreditInternational				0					
29.					0					
30. 31.	Warranty	XXX			0	XXX				
-	Reinsurance - nonproportional assumed propertyReinsurance - nonproportional assumed liability	XXXXXX			0	XXXXXX				
32. 33.	Reinsurance - nonproportional assumed financial lines				0	XXX				
33. 34.	Aggregate write-ins for other lines of business		0	0	0		0			^
35.		2,824,500	٥		2,824,500		Λ		05,972,774	1,615,757
აე.	TOTALS	2,024,500	0	DETAIL 6	DF WRITE-INS		U		0	1,010,707
3401				DETAILS (	DE MKITE-INS				n	
3402					n				n	
3403					Λ				n	
	Summary of remaining write-ins for Line 34 from overflow page	0	n	n	n	n	n		0 0	n
	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above)	0		0	n	n	n		0 0	n
3433	. Totals (Lines 3401 tillu 3403 pius 3430) (Line 34 above)	0	0	U	JU	J	U		U  U	U

(a) Including \$......0 for present value of life indemnity claims.

**PART 3 - EXPENSES** 

1.1 E 1.2 F 1.3 F 1.4 N 2. Commis 2.1 E 2.2 R 2.3 F 2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary 8 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel 8 13. Rent ar 14. Equipm 15. Cost or	adjustment services:  Direct				
1.1 E 1.2 F 1.3 F 1.4 N 2. Commis 2.1 E 2.2 R 2.3 F 2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary 8 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel 8 13. Rent ar 14. Equipm 15. Cost or	Direct				
1.2 F 1.3 F 1.4 N 2. Commis 2.1 D 2.2 R 2.3 F 2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Reinsurance assumed				
1.3 F 1.4 N 2. Commis 2.1 D 2.2 R 2.3 F 2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Alloward 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Reinsurance ceded				
1.4 N 2. Commis 2.1 C 2.2 R 2.3 F 2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Net claim adjustment services (1.1 + 1.2 - 1.3)				
1.4 N 2. Commis 2.1 C 2.2 R 2.3 F 2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Net claim adjustment services (1.1 + 1.2 - 1.3)				
2. Commis 2.1 E 2.2 R 2.3 F 2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	ission and brokerage:  Direct, excluding contingent				
2.1 C 2.2 R 2.3 F 2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Alloward 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary 8 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel 8 13. Rent ar 14. Equipm 15. Cost or	Direct, excluding contingent				
2.2 R 2.3 F 2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Alloward 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Reinsurance assumed, excluding contingent				
2.3 F 2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Reinsurance ceded, excluding contingent				
2.4 C 2.5 C 2.6 C 2.7 P 2.8 N 3. Alloward 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary 8 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel 8 13. Rent ar 14. Equipm 15. Cost or	Contingent - direct			0	
2.5 C 2.6 C 2.7 P 2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 P 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Contingent - reinsurance assumed				
2.6 C 2.7 P 2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Contingent - reinsurance ceded			0	
2.7 P 2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Policy and membership fees			0	
2.8 N 3. Allowar 4. Advertis 5. Boards, 6. Surveys 7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)			0	
<ol> <li>Allowar</li> <li>Advertis</li> <li>Boards,</li> <li>Surveys</li> <li>Audit of</li> <li>Salary at 8.1 Strate 1 Stra</li></ol>	inces to manager and agents				
<ol> <li>Advertis</li> <li>Boards,</li> <li>Surveys</li> <li>Audit of</li> <li>Salary a</li> <li>8.1 S</li> <li>8.2 F</li> <li>Employ</li> <li>Insuran</li> <li>Director</li> <li>Travel a</li> <li>Rent ar</li> <li>Equipm</li> <li>Cost or</li> </ol>	isings, bureaus and associationss and underwriting reportss and related items:  Salaries				
<ol> <li>Boards,</li> <li>Surveys</li> <li>Audit of</li> <li>Salary a         <ul> <li>8.1</li> <li>8.2</li> <li>F</li> </ul> </li> <li>Employ</li> <li>Insuran</li> <li>Director</li> <li>Travel a</li> <li>Rent ar</li> <li>Equipm</li> <li>Cost or</li> </ol>	s, bureaus and associations				
<ol> <li>Surveys</li> <li>Audit of</li> <li>Salary at 8.1 S</li> <li>8.2 F</li> <li>Employ</li> <li>Insuran</li> <li>Director</li> <li>Travel at 13. Rent ar</li> <li>Equipment</li> <li>Cost or</li> </ol>	ys and underwriting reports				
7. Audit of 8. Salary a 8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	of assureds' records				2,277,395 141,638 230,586
<ol> <li>8. Salary a 8.1 S</li> <li>8.2 F</li> <li>9. Employ</li> <li>10. Insuran</li> <li>11. Director</li> <li>12. Travel a</li> <li>13. Rent ar</li> <li>14. Equipm</li> <li>15. Cost or</li> </ol>	and related items:  Salaries		2,009,059128,323211,61834,630		2,277,395 141,638 230,586
8.1 S 8.2 F 9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Salaries				141,638
9. Employ 10. Insuran 11. Director 12. Travel a 13. Rent ar 14. Equipm 15. Cost or	Payroll taxes				141,638
<ol> <li>Employ</li> <li>Insuran</li> <li>Director</li> <li>Travel a</li> <li>Rent ar</li> <li>Equipm</li> <li>Cost or</li> </ol>	yee relations and welfare		211,61834,630		230,586
<ul><li>10. Insuran</li><li>11. Director</li><li>12. Travel a</li><li>13. Rent ar</li><li>14. Equipm</li><li>15. Cost or</li></ul>	once		34,630		
<ol> <li>Director</li> <li>Travel at</li> <li>Rent ar</li> <li>Equipment</li> <li>Cost or</li> </ol>	and travel items		•		
<ul><li>12. Travel a</li><li>13. Rent ar</li><li>14. Equipm</li><li>15. Cost or</li></ul>	and travel items				34,630
<ul><li>13. Rent ar</li><li>14. Equipm</li><li>15. Cost or</li></ul>					0
<ul><li>14. Equipm</li><li>15. Cost or</li></ul>	nd rent items		88,050		89,935
15. Cost or			159,997		159,997
15. Cost or	ment		•		•
	r depreciation of EDP equipment and software		<i>'</i>		*
	g and stationery				
_	ge, telephone and telegraph, exchange and express				
	and auditing				
	(Lines 3 to 18)				
•			3,435,956	0	3,738,459
	licenses and fees:				
	State and local insurance taxes deducting guaranty association credits		407.040		407.040
	of \$0.				•
	Insurance department licenses and fees				
	Gross guaranty association assessments				
	All other (excluding federal and foreign income and real estate)				
	Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
21. Real es	state expenses				0
22. Real es	state taxes				0
	ursements by uninsured plans				
24. Aggreg	gate write-ins for miscellaneous expenses		31,843	8,244	40,086
25. Total ex	expenses incurred	2,007,655	3,749,302	8,244	(a)5,765,201
26. Less un	npaid expenses - current year		202,312		661,315
27. Add unj	npaid expenses - prior year		92,731		176,869
28. Amoun	nts receivable relating to uninsured plans, prior year				0
29. Amount	nts receivable relating to uninsured plans, current year	[ <u></u>	<u></u>		0
	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)				
		S OF WRITE-INS	, , !"		,,
2401 Office s	supplies		30 522		30 522
	miscellaneous expenses				
	miscenarieous expenses				
	ary of remaining write-ins for Line 24 from overflow page				

<sup>(</sup>a) Includes management fees of \$......0 to affiliates and \$......0 to non-affiliates.

# Annual Statement for the year 2013 of the MedMal Direct Insurance Company **EXHIBIT OF NET INVESTMENT INCOME**

	EXHIBIT OF NET INVESTMENT INC	CIVIL		1	
			1		2
			Collected During Year		Earned During Year
1.	U.S. government bonds	(a)	During Fear		During real
1.1	Bonds exempt from U.S. tax.		120,727		185.481
1.2	Other bonds (unaffiliated)	. ,	126,221		118,513
1.3	Bonds of affiliates.	` '			110,010
2.1	Preferred stocks (unaffiliated).	` '	18,144		18,144
	Preferred stocks of affiliates	. ,			
2.2	Common stocks (unaffiliated)				36.478
	Common stocks of affiliates.				
3.	Mortgage loans				
4.	3 3	` '			
5.	Contract loans.				
6.	Cash, cash equivalents and short-term investments	(e)	9,922		9,252
7.	·	` '			
8.	Other invested assets	( )			
9.	Aggregate write-ins for investment income				0
10.	Total gross investment income				367,868
11.	Investment expenses.				8,244
12.	Investment taxes, licenses and fees, excluding federal income taxes			(g)	
13.	Interest expense			(h)	
14.	Depreciation on real estate and other invested assets			(i)	0
15.	Aggregate write-ins for deductions from investment income			0	
16.	Total deductions (Lines 11 through 15)			8,244	
17.	Net investment income (Line 10 minus Line 16)				359,624
	DETAILS OF WRITE-INS				
0901.					
0902.					
0903.					
0998.	Summary of remaining write-ins for Line 9 from overflow page		0		0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above)		0		0
1501.					
1502.					
1503.					
1598.	Summary of remaining write-ins for Line 15 from overflow page			0	
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above)				0
(a)	Includes \$620 accrual of discount less \$15,300 amortization of premium and less \$(95,602) paid for accrued inter-				
(b)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued dividends				
(c)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.				
(d)	Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.				
(e)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.				
(f)	Includes \$0 accrual of discount less \$0 amortization of premium.				
(g)	Includes \$0 investment expenses and \$0 investment taxes, licenses and fees, excluding federal income taxes,	, attributa	ble to Segregated and	Separate	Accounts.
(h)	Includes \$0 interest on surplus notes and \$0 interest on capital notes.				
(i)	Includes \$0 depreciation on real estate and \$0 depreciation on other invested assets.				

EXHIBIT OF CAPITAL GAINS (LOSSES)

	ΕΛΠΙΟΙΙ	OF CAPITA	IL GAINS (L	.USSES)		
		1	2	3	4	5
		Realized				Change in
		Gain (Loss)	Other	Total Realized	Change in	Unrealized
		on Sales	Realized	Capital Gain (Loss)	Unrealized	Foreign Exchange
		or Maturity	Adjustments	(Columns 1 + 2)	Capital Gain (Loss)	Capital Gain (Loss)
1.	U.S. government bonds			0		
1.1	Bonds exempt from U.S. tax			0		
1.2	Other bonds (unaffiliated)			29,656	(81,194)	
1.3	Bonds of affiliates			0		
2.1	Preferred stocks (unaffiliated)			0	(28,850)	
2.11	Preferred stocks of affiliates			0		
2.2	Common stocks (unaffiliated)	292,055		292,055	(123,428)	
2.21	Common stocks of affiliates			0		
3.	Mortgage loans			0		
4.	Real estate			0		
5.	Contract loans			0		
6.	Cash, cash equivalents and short-term investments			0		
7.	Derivative instruments			0		
8.	Other invested assets			0		
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)		0	321,711	(233,472)	0
-		DETAILS OF	WRITE-INS			
0901.				0		
0902.				0		
0903.				0		
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
	Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above)	0	0	0	0	0
	, , , , , , , , , , , , , , , , , , , ,					

# Annual Statement for the year 2013 of the MedMal Direct Insurance Company **EXHIBIT OF NONADMITTED ASSETS**

		1 Current Year	2 Prior Year	3 Change in Total
		Total	Total	Nonadmitted Assets
		Nonadmitted Assets	Nonadmitted Assets	(Col. 2 - Col. 1)
1.	Bonds (Schedule D)			0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks			
	2.2 Common stocks			0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens			
	3.2 Other than first liens			0
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
	4.3 Properties held for sale			0
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2)			
	and short-term investments (Schedule DA)			
6.	Contract loans			-
7.	Derivatives (Schedule DB)			
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities			
10.	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			0
14.	Investment income due and accrued			0
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection			0
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			0
	15.3 Accrued retrospective premiums			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			
17.	Amounts receivable relating to uninsured plans			
	Current federal and foreign income tax recoverable and interest thereon			
	Net deferred tax asset			
19.	Guaranty funds receivable or on deposit	•		, .
20.	Electronic data processing equipment and software			
21.	Furniture and equipment, including health care delivery assets			
22.	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			
24.	Health care and other amounts receivable			
25.	Aggregate write-ins for other than invested assets		65,405	1,109
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected  Cell Accounts (Lines 12 through 25)	211 110	212 906	/07 242
27	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			•
28.	TOTALS (Lines 26 and 27)	-	213,806	(97,313
4.11		F WRITE-INS		
	. Summary of remaining write-ins for Line 11 from overflow page			
	. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)			
	. Prepaid expenses			
2502	. Security deposits	18,000	18,000	0
2598	. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599	. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)	64,296	65,405	1,109

#### Note 1 - Summary of Significant Accounting Policies

#### A. Accounting Practices

MedMal Direct Insurance Company (the "Company") is a property and casualty insurance company licensed as a Florida domiciled stock insurer to write medical malpractice insurance in Florida. The Company received its Certificate of Authority from the Florida Office of Insurance Regulation (the "OIR") on June 17, 2010.

The accompanying financial statements of the Company have been prepared on the statutory basis of accounting as defined and in accordance with the National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* except to the extent state law differs. The Commissioner of the OIR has the right to permit specific practices that deviate from prescribed practices.

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

The preparation of financial statements in conformity with statutory accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

### C. Accounting Policies

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct and ceded business.

Expenses incurred in connection with acquiring new insurance business are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

Net investment income earned consists primarily of interest and dividends less investment related expenses. Interest is recognized on an accrual basis and dividends are recognized on an ex-dividend basis. Net realized capital gains (losses) are recognized on a specific identification basis when securities are sold, redeemed or otherwise disposed of. Realized capital losses include writedowns for impairments considered to be other than temporary.

In addition, the Company uses the following accounting policies:

- 1. Short-term investments are stated at amortized cost. Non-investment grade short-term investments are stated at the lower of amortized value or fair value.
- 2. Investment grade bonds not backed by other loans are stated at amortized value using the interest method. Non-Investment grade bonds with NAIC designations of 3 through 6 are stated at the lower of amortized value or fair value. The related unrealized losses are reported in unassigned surplus along with adjustment for federal income taxes.
- 3. Common stock investments are stated at fair value. The related unrealized gains or (losses) are reported in unassigned surplus along with adjustment for federal income taxes.
- 4. Preferred stock investments are stated in accordance with the guidance provided in SSAP No. 32. Redeemable preferred stocks that have characteristics of debt securities and are rated as high quality or better are reported at cost or amortized cost. All other redeemable preferred stocks are reported at the lower of cost or fair value. Perpetual preferred stocks are stated at fair value.
- 5. The Company holds no mortgage loans.
- 6. The Company has no investments in loan-backed subsidiaries.
- 7. The Company has no investments in insurance subsidiaries.
- 8. The Company has no investments in limited partnerships.
- 9. The Company holds no derivatives.
- 10. The Company has no premium deficiency reserve.
- 11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience and industry statistics, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and, while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- 12. The Company has established a capitalization policy for prepaid expenses and purchases of items such as electronic data processing equipment, software, furniture, vehicles, other equipment and leasehold improvements. The capitalization threshold is \$1,000.
- 13. The Company has no pharmaceutical rebate receivables.

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

A. Accounting Changes Other than Codification and Correction of Errors
 None.

#### Note 3 - Business Combinations and Goodwill

A. Statutory Purchase Method

None.

B. Statutory Mergers

None.

C. Impairment Loss

None.

#### **Note 4 - Discontinued Operations**

None.

### Note 5 - Investments

A. Mortgage Loans

None.

B. Debt Restructuring

None.

C. Reverse Mortgages

None.

D. Loan-Backed Securities

None.

E. Repurchase Agreements

None.

F. Real Estate

None.

G. Low Income Housing Tax Credits

None.

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

A. Detail for Those Greater than 10% of Admitted Assets

None.

B. Impairment Write-Downs

None.

#### Note 7 - Investment Income

A. Accrued Investment Income

No significant change.

B. Amounts Nonadmitted

None

#### **Note 8 - Derivative Instruments**

None.

#### Note 9 - Income Taxes

Income before federal taxes differs from taxable income principally due to the dividends-received deduction, differences between loss and loss adjustment expense, and unearned premium reserves for tax and financial reporting.

The provision for federal income tax consists of the following components:

2013	2012
(\$93,221)	-
	-
(\$93,221)	-
\$108,630	-
-	-
	-
\$15,409	0
	(\$93,221) - (\$93,221) \$108,630 - -

The statutory basis of accounting requires that The Company record deferred tax assets and liabilities for certain temporary differences between statutory basis income before federal income taxes, plus certain items recorded.

### A. Deferred Tax Asset/(Liability)

Components of the net deferred tax asset/(liability) at December 31 are as follows:

		12/31/13			12/31/12			Change	
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
Total Gross DTAs Statutory Valuation Allowance	\$759,983	\$ 79,380	\$839,363 -	\$952,186	\$ 10,786	\$962,971 -	(\$192,203)	\$ 68,595	(\$123,608) -
Adjusted Gross DTA Total DTAs nonadmitted	759,983 47,559	\$79,380 79,380	839,363 126,939	952,186 58,173	\$ 10,786 -	962,971 58,173	(192,203) (10,614)	\$68,595 79,380	(123,608) 68,767
Subtotal Gross Admitted DTA Total gross DTLs	712,424 43,172	-	712,424 43,172	894,013 25,406	10,786 -	904,798 25,406	(181,589) 17,766	(10,786) -	(192,375) 17,766
Net admitted deferred tax asset/liability	\$669,252	-	\$669,252	\$868,607	\$ 10,786	\$879,392	(\$199,355)	(\$ 10,786)	(\$210,141)

### Admission Calculation Components SSAP 101 (Paragraph 11)

		12/31/13			12/31/12			Change	
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
Recovered through loss carrybacks (11.a.) Lesser of:	-	-	-	-	-	-	-	-	-
Adjusted gross DTAs expected to be realized (3 yrs) (11.b.i.)	\$669,252	-	\$669,252	\$879,392	-	\$879,392	(\$210,141)	-	(\$210,141)
Adjusted gross DTAs allowed per limitation threshold(11.b.ii.)	1,462,614	-	1,462,614	1,010,850	-	1,010,850	451,764	-	451,764
Adjusted gross DTAs offset against existing DTLs (11.c.)	43,172	-	43,172	25,406	-	25,406	17,766	-	17,766
DTAs admitted as a result of SSAP 101	\$712,424	-	\$712,424	\$904,798	-	\$904,798	(\$192,375	-	(\$192,374)
Datia (/ Handle Datamaia	. D		12/31/13			12/31/12			Change
Ratio % Used to Determine Threshold Limitation	,		563%			638%			(75%)
Adjusted Capital & Surplus Recovery Period & Thresh			9,750,762			6,739,000			3,011,761

### B. Deferred Tax Liabilities Not Recognized

The Company's tax planning straegies did not include the use of reinsurance-related tax planning strategies. The Company does not have any unrecognized deferred tax liabilities.

### C. Current and Deferred Income Taxes

The tax effect of temporary differences that give rise to significant portions of the deferred tax assets and deferred tax liabilities are as follows:

	12/31/13	12/31/12	Change
Deferred tax assets			
Ordinary			
Nonadmitted Asset	\$ 46,880	\$ 64,138	(\$ 17,258)
Unearned Premiums	365,990	290,863	75,127
Loss Discounting	219,252	123,865	95,387
NOL Carryforward	112,451	473,319	(360,869)
Tax Credits	15,409	-	15,409
Subtotal	\$759,983	\$952,186	(\$192,203)
Nonadmitted	(47,559)	(58,173)	10,614
Admitted Ordinary DTAs	\$712,424	\$894,013	(\$181,589)
			_
	12/31/13	12/31/12	Change
Capital			
Unrealized Losses	\$ 79,380	\$ 10,786	\$ 68,595
Subtotal	79,380	10,786	68,595
Nonadmitted	(79,380)	<del>-</del>	(79,380)
Admitted Capital DTAs	-	\$ 10,786	(\$ 10,786)
<del>-</del>			
Total admitted defered tax assets	\$712,424	\$904,798	(\$192,375)
Defermed toy lightlities			
Deferred tax liabilities			
Ordinary	¢ 27 424	ቀ ለ ኃዕዕ	¢ 10 112
Fixed Assets Prepaid Expenses	\$ 27,431 15,741	\$ 9,288 16,118	\$ 18,143 (377)
Subtotal	\$ 43,172	\$ 25,406	
Subiolai	\$ 43,17Z	ֆ 25,406	\$ 17,766
Deferred tax liabilities			
Capital			
Unrealized Gains	_	_	_
Subtotal			
Gubtotai			
Total deferred tax liabilities	\$25,406	\$ 25,406	\$4,650
Total dolored tax habilition	Ψ20,+00	Ψ 20,400	ψ,000
Net admitted deferred tax assets	\$669,252	\$879,392	(\$210,141)
. 151 5.5	Ψ003,232	ψυτ υ,υυΖ	(ΨΖ 10, 1+1)

The change in net deferred income taxes is comprised of the following:

	12/31/13	12/31/12	Change
Total deferred tax assets	\$839,363	\$962,971	(\$123,608)
Total deferred tax liabilities	43,172	25,406	17,766
Net deferred tax asset	\$796,191	\$937,565	(\$141,374)
Tax effect of change in unrealized gains(losses)			(\$ 68,595)
Change in net deferred income tax		_	(\$209,969)

### D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

The significant items causing a difference between the statutory federal income taxes and the Company's effective income tax rate are as follows:

	Amount	Effective Tax Rate
Provision computed at statutory rate	\$254,720	34.00%
Meals and Entertainment	2,386	0.32%
Penalties	-	0.00%
Change in Nonadmitted Assets	17,258	2.30%
Prior Period Perms	6,105	0.81%
T-E Interest	(63,063)	-8.42%
Proration at 15%	9,722	1.30%
Dividends received deduction	(1,749)	-0.23%
Total statutory income taxes	\$225,378	30.08%

Reconciliation of Federal Income Tax Rate to Actual Effective Rate

Federal and foreign income taxes incurred Current taxes on realized capital gains Change in net deferred income taxes Total Statutory income taxes

12/31/13	12/31/12
(\$ 93,221)	-
108,630	-
209,969	(\$281,214)
\$225,378	(\$281,214)

- E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits
  - 1. As of December 31, 2013, the Company had \$330,738 of net operating losses available to offset future taxable income that will begin to expire in 2031.
  - 2. The following are federal income taxes incurred in the current and prior year that may be available for recovery in the event of future net operating losses.

2013	-
2012	-

- 3. The company does not have deposits admitted under Section 6603 of the Internal Revenue Code
- F. Consolidated Federal Income Tax Return

The Company does not file a consolidated income tax return.

G. Federal and Foreign Tax Loss Contingencies

The Company has no tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

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

A. Nature of Relationships

The Company is a wholly owned subsidiary of MedMal Direct Insurance Group, LLC ("MDIG")

B. Detail of Transactions Greater than ½ of 1% of Admitted Assets

None.

C. Change in Terms of Intercompany Arrangements

None.

D. Amounts Due To or From Related Parties

At December 31, 2013, The Company had an Intercompany Payable Due to MDIG for \$34,495. The payable is for the accrual of the expenses related to the Service Agreement for the month of December. A check was issued on January 7, 2014 for these expenses.

E. Guarantees or Contingencies for Related Parties

None.

F. Management, Service Contracts, and Cost Sharing Arrangements

The Company entered into a Service Agreement on June 11, 2010 with MDIG. Pursuant to the agreement, MDIG provides personnel to perform certain services for the benefit of The Company including but not limited to sales and marketing, accounting and financial reporting, operations and regulatory responsibilities. The Company pays a fee equal to one hundred and fifteen percent of the actual compensation and related personnel costs incurred by MDIG as a resulf of providing these services to The Company.

G. Nature of Relationships that Could Affect Operations

All outstanding shares of The Company are owned by MDIG.

H. Amount Deducted for Investment in Upstream Company

Not applicable.

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

None.

J. Writedown for Impairments of Investments to Affiliated Companies

None.

K. Foreign insurance subsidiary valued using CARVM.

None

L. Downstream Holding Company Valued Using Look-Through Method

Not applicable.

#### Note 11 - Debt

None.

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

A. Defined Benefit Plan

Not applicable

B. Defined Contribution Plan

Not applicable

C. Multiemployer Plans:

Not applicable

D. Consolidated/Holding Company Plans

Not applicable

E. Postemployment Benefits and Compensated Absences

Not applicable

#### Note 13 - Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

A. Outstanding Shares

The Company has 10,000,000 shares of \$0.50 par value common stock authorized and 9,500,360 shares issued and outstanding. The Company has no preferred stock authorized, issued or outstanding.

On March 14, 2013 the Company amended its Articles of Incorporation by reducing the par value of its common stock from \$1.00 to \$0.50. The par value reduction resulted in the reclassification of \$4,750,060 from Common Stock to Additional Paid in Capital.

B. Dividend Rate of Preferred Stock

Not applicable

C., D. and E. Dividend Restrictions

Under Florida Statutes, a domestic stock insurer is restricted to payment of dividends from its available and accumulated surplus funds which is derived from realized net operating profits on its business and net realized capital gains. Further restrictions limit dividend payments without prior written approval from the OIR during the first three years of operations.

F. Mutual Surplus Advances

Not applicable

G. Company Stock Held for Special Purposes

Not applicable

H. Changes in Special Surplus Funds

Not applicable

I. Changes in Unassigned Funds

Not applicable

J. Surplus Notes

Not applicable

K. and L. Quasi Reorganizations

Not applicable

M. Dividend Payments

Not applicable

#### Note 14 - Contingencies

A. Contingent Commitments

Not applicable

B. Guaranty Fund Assessments

The Company is subject to assessments by a Florida guaranty fund. The activities from this fund include collecting funds from solvent insurance companies to cover losses resulting from the insolvency or rehabilitation of other insurance companies. These assessments can be passed through to policyholders as policyholder surcharges. SSAP 35R specifies that if these assessments will be recouped from the policyholders it can be recorded as an admitted asset prior to billing. The Company set up a receivable of \$33,007 for the 2011 assessment paid to the Florida Insurance Guaranty Association on 12/03/12. A FIGA Assessment Fee of 0.3% is being assessed to every new and renewal policy effective on or after July 1, 2013 in order to recoup the assessment. The Company recouped \$14,920 from July 1, 2013 to December 31, 2013.

C. Gain Contingencies

Not applicable

D. Extra Contractual Obligations and Bad Faith Losses

Not applicable

E. Other Contingencies and Writedowns for Impairment

Not applicable

F. All Other Contingencies

No significant change.

#### Note 15 - Leases

- A. Lessee Leasing Arrangements
  - 1. The Company entered into a 5 year Lease Agreement with Pky Realty II, Jacksonville I, LLC on August 1, 2012 for office space and facilities. An \$18,000 Security Deposit was required and is recorded as a nonadmitted asset on the Balance Sheet.

The agreement includes an increase in rent each year, as well as, incentives providing that no default of payment occurs. The incentive includes monthly installments of base rent be abated by fifty percent for specified months throughout the lease agreement for a total of fifteen months and discounts totaling \$105,528. SSAP No. 22 states, "These incentives shall be recognized over the lease term on a straight-line basis..." Assuming no default of payment occurs, rent expense of \$11,934.79 is recognized each month plus sales tax.

	Expense	Expense
Year	Recognized	Incurred
2012	\$59,674	\$64,481
2013	\$143,217	\$143,406
2014	\$143,217	\$147,709
2015	\$143,217	\$131,002
2016	\$143,217	\$164,173
2017	\$83,544	\$65,317

2. Future minimum rental payments are as follows:

Year	Amount
2014	\$143,217
2015	\$143,217
2016	\$143,217
2017	\$83,544
2018	\$0

The lease expires in the Year 2017, therefore, the amount of rental payments for the entire year is not available at this time.

B. Lessor Leasing Arrangements

Not applicable

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

A. Financial Instruments with Off-Balance Sheet Risk

Not applicable

B. Financial Instruments with Concentrations of Credit Risk

No significant change.

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

A. Transfers of Receivables Reported as Sales

Not applicable

B. Transfers and Servicing of Financial Assets

Not applicable

C. Wash Sales

Not applicable

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

A. Administrative Services Only (ASO) Plans

Not applicable

B. Administrative Services Contract (ASC) Plans

Not applicable

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contracts

Not applicable

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

Not applicable

#### Note 20 - Fair Value Measurements

A. 1. Fair value measurements at reporting date

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

Description	Level 1	Level 2	Level 3	Total
Assets on balance sheeet at fair value				
Bonds				
Issuer Obligations	14,199,163			14,199,163
Preferred Stock				
Industrial and Misc	271,071			271,071
Common Stock				
Industrial and Misc	2,009,644			2,009,644
Total assets on balance sheet at fair value	16,479,878			16,479,878

2. Fair value measurements in Level 3 - reconciliation

Not applicable

3. Fair value measurements in for transfers between Levels

Not applicable

4. Fair value measurements within Level 2 and Level 3 - valuation technique

Bonds carried at fair value categorized as Level 2 were valued using a market approach.

#### Note 21 - Other Items

A. Extraordinary Items

Not applicable

B. Troubled Debt Restructuring

Not applicable

C. Other Disclosures

Assets in the amount of \$2,475,000 at December 31, 2013 were on deposit with governmental authorities or trustees as required by law. A \$250,000 deposit is with the State of Florida, Bureau of Collateral Management a \$25,000 deposit is with the State of Georgia, a \$2,000,000 is with the State of Texas and \$200,000 with the State of North Carolina.

In accordance with Section 625.012(5), Florida Statutes, Agents' Balances Certification, on Page 2, Line 15.1, represents uncollected premiums due from customers, all of which are Non-Controlling persons.

D. Uncollectible Premiums Receivable

Not applicable

E. Business Interruption Insurance Recoveries

Not applicable

#### Note 22 - Events Subsequent

A. The Company entered into a three year reinsurance treaty explained in Note 23. The coverage requires paid premium of \$1,116,375 for the period March 1, 2013 through December 31, 2013. A premium payment was made on January 3, 2014 for \$279,094 less a premium adjustment of \$80,968 from treaty year 1.

#### Note 23 - Reinsurance

A. Unsecured Reinsurance Recoverable

None.

B. Reinsurance Recoverable in Dispute

None.

- C. Reinsurance Assumed and Ceded
  - 1. The Company entered into a three year reinsurance treaty with a panel of international reinsurers including Lloyd's of London and Bermuda based companies effective March 1, 2011. The reinsurance treaty provides Excess of Loss coverage whereby the Reinsurers shall pay up to \$750,000 Ultimate Net Loss, each and every loss, each and every insured, excess of a retention equal to \$250,000 Ultimate Net Loss, each and every loss, each and every insured. Additionally, the treaty will provide Clash Coverage, Extra Contractual Obligations, and Excess of Policy Limits Coverage. In addition, Reinsurers will also be obligated to pay a pro rata share of all Allocated Loss Adjustment Expenses, based on the ratio that the Reinsurers' portion of loss (indemnity only) bears to the total amount of the loss (indemnity only). The provisional premium at December 31, 2013 is \$1,150,385.
  - 2. The reinsurance agreement provides for adjustments based on certain limitations noted in the reinsurance contract. The coverage is subject to a minimum premium of 40% of provisional premiums. The table below summarizes these adjustments based on actual results and no losses paid as of December 31, 2013.

	March 1, 2011 - February 28, 2013	March 1, 2012 - February 28, 2013	March 1, 2013 - December 31, 2013
Ceded premiums	\$623,871	\$804,855	\$890,934
Swing-rate adjustment	(323,871)	(463,123)	(534,561)
Ceded earned premiums	\$300,000	\$341,732	\$356,373

D. Uncollectible Reinsurance

None.

E. Commutation of Ceding Reinsurance

None.

F. Retroactive Reinsurance

None.

g. Reinsurance Accounted for as a Deposit

None.

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

A. Method Used to Estimate

Not applicable

B. Method Used to Record

Not applicable

C. Amount and Percent of Net Retrospective Premiums

Not applicable

D. Calculation of Non-admitted Accrued Retrospective Premiums

Not applicable

#### Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

Loss and Loss Adjustment Expenses ("LAE") payments of \$279,000 and \$511,052 were paid from October 1 through December 31, 2013. The increase in the Change in Loss Reserves of \$1.1 million is a result of evaluating additional information regarding unpaid claims. Current year changes in estimates of the costs of prior year losses and LAE affect the current year Statement of Income by \$3,659,460. The table below shows the increase per expense from December 31, 2012 to December 31, 2013.

	<u>12/31/12</u>	<u>12/31/13</u>	<u>Change</u>	<u>Percentage</u>
Losses Incurred:				
Losses Paid	\$ 893,000	\$ 729,000	(\$168,000)	-10%
Change in Loss Reserves	1,928,216	3,058,312	1,130,096	71%
LAE Incurred:				
ALAE Paid	\$ 546,699	\$ 987,488	\$ 444,789	28%
ULAE Paid	103,629	300,618	196,989	12%
Change in LAE Reserves	602,546	601,148	(1,398)	0%
Total	\$4,074,090	\$5,676,566	\$1,602,477	100%

The Company analyzed their Loss and LAE Reserves on 2010, 2011 and 2012 Open Claims which resulted in a \$323,713 adjustment to Loss and LAE Reserves as of September 30, 2013 and a \$196,164 adjustment as of December 31,2013.

#### Note 26 - Intercompany Pooling Arrangements

Not applicable.

#### Note 27 - Structured Settlements

A. Reserves Released due to Purchase of Annuities

Not applicable

B. Annuity Insurers with Balances due Greater than 1% of Policyholders' Surplus

Not applicable.

#### 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

A. Tabular Discounts

Not applicable

B. Non-Tabular Discount

Not applicable

C. Changes in Discount Assumptions

Not applicable

#### Note 33 - Asbestos/Environmental Reserves

Not applicable.

#### Note 34 - Subscriber Savings Accounts

Not applicable.

#### Note 35 - Multiple Peril Crop Insurance

Not applicable.

### Note 36 - Financial Guaranty Insurance

Not applicable.

# Annual Statement for the year 2013 of the MedMal Direct Insurance Company **GENERAL INTERROGATORIES**

### PART 1 - COMMON INTERROGATORIES - GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?  If yes, complete Schedule Y, Parts 1, 1A and 2.						
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards						
1.3	and disclosure requirements substantially similar to those required by such Act and regulations?  Yes [X] State regulating?  Florida	No [ ]	N/A [ ]				
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[X]	No [ ]				
2.2 3.1	· · · · · · · · · · · · · · · · · · ·	03/14/2013 12/31/2012					
3.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity.						
3.3	This date should be the date of the examined balance sheet and not the date the report was completed or released.  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	12/31/2011					
3.4		02/07/2013					
3.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement						
3.6 4.1	filed with departments?  Have all of the recommendations within the latest financial examination report been complied with?  During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial	No[] No[]	N/A [ X ] N/A [ X ]				
	part (more than 20 percent of any major line of business measured on direct premiums) of: 4.11 sales of new business?	Yes[]	No [X]				
	4.12 renewals?	Yes[]	No [X]				
4.2	During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:						
	4.21 sales of new business?	Yes[]	No [X]				
5.1	<ul><li>4.22 renewals?</li><li>Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?</li></ul>	Yes[] Yes[]	No [ X ] No [ X ]				
5.2	If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.	1	[]				
	1 2 3 Name of Entity NAIC Co. Code State of Domicile						
6.1 6.2	Has the 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? If yes, give full information:	Yes[]	No [X]				
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?	Yes [ ]	No [X]				
7.2	If yes, 7.21 State the percentage of foreign control		%				
	7.22 State the nationality(ies) of the foreign person(s) or entity(ies); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(ies) (e.g., individual,						
	corporation, government, manager or attorney-in-fact)  1 2						
	Nationality Type of Entity						
8.1 8.2	Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?  If response to 8.1 is yes, please identify the name of the bank holding company.	Yes[]	No [X]				
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities firms?  If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial 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.	Yes[]	No [X]				
	1         2         3         4         5         6           Affiliate Name         Location (City, State)         FRB         OCC         FDIC         SEC						
9.	What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  Johnson Lambert & Co. LLP, One Independent Drive, Suite 2202, Jacksonville, Florida 32202	-					
10.1	Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?	- Yes[]	No [ X ]				
10.2	If the response to 10.1 is yes, provide information related to this exemption:						
10.3 10.4	Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation?  If the response to 10.3 is yes, provide information related to this exemption:	Yes[]	No [X]				

# Annual Statement for the year 2013 of the MedMal Direct Insurance Company **GENERAL INTERROGATORIES**

### PART 1 - COMMON INTERROGATORIES - GENERAL

	,	ed an Audit Committee in compliance with the	e domiciliary state insurance laws?	Yes[]	No [ X ]	N/A [ ]	
10.6	If the answer to 10.5 is no or n/a, The Company has an audit comm		n exception from the Florida Office of Insurance Regulation as to	the independence	e rules.		
11.	What is the name, address and a consulting firm) of the individual p		tity or actuary/consultant associated with an actuarial ertification?				
12.1	Does the reporting entity own an 12.11 Name of real estate hold	y securities of a real estate holding company ling company	or otherwise hold real estate indirectly?		Yes[]	No [X]	
12.2	12.12 Number of parcels involv 12.13 Total book/adjusted carr If yes, provide explanation.						
13. 13.1		HES OF ALIEN REPORTING ENTITIES ONL during the year in the United States manager	Y: or the United States trustees of the reporting entity?				
13.2 13.3 13.4 14.1	Does this statement contain all b Have there been any changes m If answer to (13.3) is yes, has the Are the senior officers (principal of the reporting entity subject to a . Honest and ethical cond b. Full, fair, accurate, timely c. Compliance with applica d. The prompt internal repo		Yes[] Yes[] No[] Yes[X]	No[] No[] N/A[]			
14.2	If the response to 14.1 is no, pleater than the code of ethics for senior	ase explain:			Yes[]	No [X]	
	Have any provisions of the code If the response to 14.3 is yes, pro	of ethics been waived for any of the specified ovide the nature of any waiver(s).	officers?		Yes[]	No [X]	
	SVO Bank List? If the response to 15.1 is yes, inc	•	einsurance where the issuing or confirming bank is not on the  A) Routing Number and the name of the issuing or confirming baredit is triggered.	ınk	Yes[]	No [X]	
	1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit		4 Amount		
16. 17. 18.	Does the reporting entity keep a Has the reporting entity an estal	estments of the reporting entity passed upor a complete permanent record of the proceedi blished procedure for disclosure to its Board	ERROGATORIES - BOARD OF DIRECTORS n either by the Board of Directors or a subordinate committee the ings of its Board of Directors and all subordinate committees the of Directors or trustees of any material interest or affiliation to that is in conflict or is likely to conflict with the official duties		Yes	s[X] I	No[] No[]
19. 20.1 20.2	Total amount loaned during the 20.11 To directors or other off 20.12 To stockholders not offi 20.13 Trustees, supreme or g	ed using a basis of accounting other than Sta year (inclusive of Separate Accounts, exclus ficers cers rand (Fraternal only) ng at the end of year (inclusive of Separate A		iting Principles)?	\$ \$ \$		0 0
21.1 21.2	20.22 To stockholders not offi 20.23 Trustees, supreme or g Were any assets reported in this such obligation being reported in	cers rand (Fraternal only) s statement subject to a contractual obligatio	n to transfer to another party without the liability for		\$ \$		0

DADT 1_	COMMON	INTERROGATORIES	- EINIANCIAI
PARI I		INIERKUMAIUKIES	- FINANGIAI

22.1	Does this statement include payments for fund or guaranty association assessments		ed in the Annual Statement Instructions other th	an guaranty		Yes [	] No[X			
22.2	2 If answer is yes: 22.21 Amount paid as losses or risk adjustment									
	<ul><li>22.21 Amount paid as losses or risk adj</li><li>22.22 Amount paid as expenses</li></ul>	justment								
	22.23 Other amounts paid									
	If you indicate any amounts received from parent included in the Days 2 amount									
23.2	If yes, indicate any amounts receivable fro	om parent included in the	e Page 2 amount.							
24.01	Ware all the stocks, bonds and other securit		DMMON INTERROGATORIES - INV of current year, over which the reporting entity has							
			n securities lending programs addressed in 24.03)			Yes [X]	No [ ]			
24.02	If no, give full and complete information rela	iting thereto.								
			cluding value for collateral and amount of loaned s nce Note 17 where this information is also provided							
	Does the company's security lending progra Risk-Based Capital Instructions?	m meet the requirements	for a conforming program as outlined in the		Yes [ ]	No[]	N/A [ X ]			
24.05	If answer to 24.04 is yes, report amount of c									
	If answer to 24.04 is no, report amount of co Does your securities lending program require		s. ies) and 105% (foreign securities) from the counter	party at the						
	outset of the contract?	,	, , ,		Yes [ ]	No [ ]	N/A [ X ]			
	Does the reporting entity non-admit when the Does the reporting entity or the		the counterparty falls below 100%? ent utilize the Master Securities Lending Agreemer	nt (MSLA)	Yes [ ]	No [ ]	N/A [ X ]			
24 10	to conduct securities lending?  For the reporting entity's security lending pro-	ogram state the amount of	f the following as of December 31 of the current ye	ear:	Yes [ ]	No [ ]	N/A [ X ]			
	24.101 Total fair value of reinvested collate	eral assets reported on Sch	nedule DL, Parts 1 and 2.							
	24.102 Total book adjusted/carrying value of 24.103 Total payable for securities lending		sets reported on Schedule DL, Parts 1 and 2.							
25.1	Were any of the stocks, bonds or other asse	ets of the reporting entity o	wned at December 31 of the current year not exclu							
	control of the reporting entity or has the reporting entit		erred any assets subject to a put option contract the	at is currently in force?		Yes[X]	No[]			
	If yes, state the amount thereof at Decembe	er 31 of the current year:				•				
	<ul><li>25.21 Subject to repurchase agreements</li><li>25.22 Subject to reverse repurchase agree</li></ul>	ements				\$ \$				
	25.23 Subject to dollar repurchase agreem					\$				
	<ul><li>25.24 Subject to reverse dollar repurchase</li><li>25.25 Pledged as collateral</li></ul>	agreements				\$ \$				
	<ul><li>25.26 Placed under option agreements</li><li>25.27 Letter stock or securities restricted a</li></ul>					\$				
	<ul><li>25.27 Letter stock or securities restricted a</li><li>25.28 On deposit with state or other regula</li></ul>					\$ \$				
25.3	25.29 Other For category (25.27) provide the following:					\$	0			
20.0	1		2		3					
	Nature of Restriction	n	Description		Amount					
26.2	Does the reporting entity have any hedging if yes, has a comprehensive description of the If no, attach a description with this statement	he hedging program been			Yes [ ]	Yes [ ] No [ ]	No [ X ] N/A [ ]			
27.1	Were any preferred stocks or bonds owned	as of December 31 of the	current year mandatorily convertible into equity, or	, at the option of the						
	issuer, convertible into equity?  If yes, state the amount thereof at Decembe	or 31 of the current year				Yes [ ]	No [ X ]			
28.	Excluding items in Schedule E-Part 3-Specia vaults or safety deposit boxes, were all stock	al Deposits, real estate, m	ortgage loans and investments held physically in ti ities, owned throughout the current year held pursu II - General Examination Considerations, F. Outson	uant to a custodial agree	ment					
	Custodial or Safekeeping Agreements of the	e NAIC Financial Condition	n Examiners Handbook?	-		Yes [X]	No [ ]			
28.01	For agreements that comply with the require	ments of the NAIC Finance	cial Condition Examiners Handbook, complete the 2	tollowing: !						
	Name of Custodian(s Merrill Lynch, Pierce, Fenner & Smith, Inc.	/	Custodian' 50 N. Laura St Ste 3700, Jacksonville, FL 32202	s Address						
			AIC Financial Condition Examiners Handbook, prov	vide the						
ı	name, location and a complete explanation:				,					
	1		2		3					
	Name(s)		Location(s)		Complete Ex	pianation(s)				
28.03	Have there been any changes, including nar	me changes, in the custod	lian(s) identified in 28.01 during the current year?			Yes [ ]	No [X]			
28.04	If yes, give full and complete information rela	ating thereto:			T					
	1 Old Custodian		2 New Custodian	3 Date of Change	4 Rea					
	Old Odd(Odidi)	<u> </u>	.1011 Guddouluit	Date of Officially	i Nea					
	•	•	on behalf of broker/dealers that have access to the	investment						
ĺ	accounts, handle securities and have author	rity to make investments o				•				
	1 Central Registration Depository Number(s)		2 Name		Addi					
	7691	Merrill Lynch, Pierce, Fe			50 N. Laura St Ste 3700		FL 32202			
	108928	BlackRock Investment M	lanagement, LLC		800 Scudders Mill Road					
29.1	Does the reporting entity have any diversifie	d mutual funds reported in	n Schedule D-Part 2 (diversified according to the S	ecurities and						

15.2

Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes[] No[X]

If yes, complete the following schedule:		2			3		
OLIOID #					Book/Adjusted		
CUSIP#		Name of Mutu	ial Fund		Carrying Value		
					0		
For each mutual fund listed in the table above	e, complete the following sch	edule:					
1			2		3	4	
					Amount of Mutual		
					Fund's Book/Adjusted		
Name of Mutual Fund			e of Significant Holdin	g	Carrying Value		
(from the above table)	)	1	of the Mutual Fund		Attributable to Holding	Date of Va	aluation
Provide the following information for all short-	-term and long-term bonds ar	nd all preferred stocks. [	Do not substitute amo	rtized value or statement	value for fair value		
Torrido dio fonoming información for all orione	tom and long tom solide at	1	2	3			
				Excess of Statement			
		Statement		over Fair Value (-),			
		(Admitted)	Fair	or Fair Value over			
		Value	Value	Statement (+)			
30.1 Bonds		14,199,163	13,822,532	(376,631)			
30.2 Preferred stocks		271,071	271,071	0			
30.3 Totals		14,470,234	14,093,603	(376,631)			
30.4 Describe the sources or methods util The fair value of the bond securities			ong term Certificates o	f Deposit are based on the	ne principal balance.		
Was the rate used to calculate fair value dete If the answer to 31.1 is yes, does the reportin				or electronic conv) for al	l	Yes [X]	No [
prokers or custodians used as a pricing source		iokoi o oi odotodidiro pri	ionig policy (nara copy	or cicotronic copy) for all	!	Yes [X]	No [
If the answer to 31.2 is no, describe the report	rting entity's process for dete	rmining a reliable pricing	source for purposes	of disclosure of fair value	for Schedule D.		·
Have all the filing requirements of the Purpos	ses and Procedures Manual c	of the NAIC Securities V	aluation Office heen fo	allowed?		Yes[X]	No [
If no, list exceptions:	oco ana i roccarios manaaro	i die 14 de coodides ve	aldation office boom to	mowou:		100[X]	140 [
						-	
	PART 1 - C0	OMMON INTERR	OGATORIES - (	OTHER			
Amount of payments to trade associations, se	· ·	•	•			\$	40,00
List the name of the organization and the am trade associations, service organizations and				ents to			
	1	_			2		
Demotech, Inc.	Nam	e			Amount Paid 20,000		
A.M. Best Company					20,000		
Amount of payments for legal expenses, if ar	•				-,,,,,,	\$	6,60
List the name of the firm and the amount paid		ented 25% or more of th	ne total payments				
or legal expenses during the period covered						1	
	1 Nam	e			2 Amount Paid		
Fowler White Boggs, PA	INAIII	•			4,715		
Marks Gray					1,889		
Amount of payments for expenditures in conr						\$	!
List the name of the firm and the amount paid							
n connection with matters before legislative before	podies, officers or departmen	ts of government during	tne period covered by	rinis statement.	2		
	Nam	_			Amount Daid		

# **GENERAL INTERROGATORIES**

### PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement	ent Insurance in force?		Yes[]	N	lo [ X ]
1.2	If yes, indicate premium earned on U.S. business only.					
1.3	What portion of item (1.2) is not reported on the Medicare S 1.31 Reason for excluding:	upplement insurance Experience Exhibit?		•••••		
	- Reason to excluding.			_,		
		V 00 AF (1 1 1 1 1 1 4 0 1		Ē		
1.4 1.5	Indicate amount of earned premium attributable to Canadian Indicate total incurred claims on all Medicare Supplement in			•••••		
1.6	Individual policies:					
	Most current three years:					
	1.61 Total premium earned					
	1.62 Total incurred claims     1.63 Number of covered lives			•••••		
	All years prior to most current three years:					
	1.64 Total premium earned					
	1.65 Total incurred claims					
17	1.66 Number of covered lives					
1.7	Group policies: Most current three years:					
	1.71 Total premium earned					
	1.72 Total incurred claims					
	1.73 Number of covered lives					
	All years prior to most current three years:					
	Total premium earned     Total incurred claims					
	1.76 Number of covered lives					
		_		i		
2.	Health test:		1 2			
		2.1 Premium Numerator\$	Current Year Prior Year0			
			0 \$0			
			0.0			
		2.4 Reserve Numerator\$.				
			0 \$0			
		2.6 Reserve Ratio (2.4/2.5)	0.0	İ		
3.1	Does the reporting entity issue both participating and non-participating	. •.		Yes[]	N	lo [ X ]
3.2	If yes, state the amount of calendar year premiums written of	n:				
	<ul><li>3.21 Participating policies</li><li>3.22 Non-participating policies</li></ul>					
4.	FOR MUTUAL REPORTING ENTITIES AND RECIPROCAL	_ EXCHANGES ONLY:		V [ 1		
4.1 4.2	Does the reporting entity issue assessable policies?  Does the reporting entity issue non-assessable policies?			Yes [ ] Yes [ ]		No[]
4.3	If assessable policies are issued, what is the extent of the co	ontingent liability of the policyholders?				
4.4	Total amount of assessments paid or ordered to be paid du					
5.	FOR RECIPROCAL EXCHANGES ONLY:					
5.1	Does the exchange appoint local agents?			Yes [ ]	Ν	No[]
5.2						
	5.21 Out of Attorney's-in-fact compensation		Yes [ ]	No [ ]		/A [ ]
r 2	5.22 As a direct expense of the exchange		Yes[ ]	No [ ]	N/	/A [ ]
5.3	What expenses of the exchange are not paid out of the com-	pensation of the Attorney-in-lact?				
5.4 5.5	Has any Attorney-in-fact compensation, contingent on fulfillr If yes, give full information:	nent of certain conditions, been deferred?		Yes [ ]	N	No [ ]
0.0	ii yos, give idii iiioimation.			_		
				Ē		
6.1	What provision has this reporting entity made to protect itsel	f from an excessive loss in the event of a catastrophe un	der a workers' compensation contract issued			
	without limit of loss?					
6.2	Describe the method used to estimate this reporting entity's	probable maximum insurance loss, and identify the type	of insured exposures comprising that			
	probable maximum loss, the locations of concentrations of t	nose exposures and the external resources (such as con-	sulting firms or computer software			
	models), if any, used in the estimation process:					
				•		
6.3	What provision has this reporting entity made (such as a car	astrophic reinsurance program) to protect itself from an e	excessive loss arising from the			
	types and concentrations of insured exposures comprising i	s probable maximum property insurance loss?				
				•		
6.4	Does the reporting entity carry catastrophe reinsurance prot	ection for at least one reinstatement, in an amount suffici	ent to cover its estimated			
	probable maximum loss attributable to a single loss event or			Yes[]	N	lo [ X ]
6.5	If no, describe any arrangements or mechanisms employed	by the reporting entity to supplement its catastrophe rein	surance program or to hedge its			
	exposure to unreinsured catastrophic loss:					
7.1	Has the reporting entity reinsured any risk with any other en	tity under a quota share reinsurance contract that include	es a provision that would			
	limit the reinsurer's losses below the stated quota share per					
7 ^	any similar provisions)?	an auch mariaine		Yes[]	N	lo [ X ]
7.2 7.3	If yes, indicate the number of reinsurance contracts containi If yes, does the amount of reinsurance credit taken reflect th		icable limiting provision(s)?	Yes [ ]		 No[]
1.0	in 100, account amount of following of contract taken fellect th	o readotton in quota enato coverage caused by any appli	icabio infining providion(a):	103[]	11	·•[]

# **GENERAL INTERROGATORIES**

### PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?  If yes, give full information:	Yes [	]	No [X]
		<b>-</b>		
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater			
	than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:			
	<ul> <li>(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;</li> <li>(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;</li> </ul>			
	(c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions			
	which are only triggered by a decline in the credit status of the other party;  (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or			
	(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity?	Yes[	]	No [X]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:			
	(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or			
	(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract?	Yes [	]	No [X]
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:  (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;  (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and  (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be			
9.4	achieved.  Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the			
	financial statement, and either:  (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or	V I		N. IV
9.5	(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?  If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.	Yes [	J	No [ X ]
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:  (a) The entity does not utilize reinsurance; or	Yes [	]	No [X]
	(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or	Yes [	]	No [ X ]
	(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.	Yes [	]	No [ X ]
10.	If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurance a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?  Yes [ ]	No [	]	N/A [ X ]
	Has this reporting entity guaranteed policies issued by any other reporting entity and now in force?  If yes, give full information:	Yes [	]	No [X]
12 1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the assets schedule, Page 2, state the amount of	_		
	corresponding liabilities recorded for: 12.11 Unpaid losses	\$		0
12.2	12.12 Unpaid underwriting expenses (including loss adjustment expenses)  Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds:			0
	If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?  Yes [ ]	No [	1	N/A [ X ]
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement:  12.41 From			%
	12.42 To  Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?  If we state the amount thereof at December 31 of current year:	Yes [		% No [ X ]
12.0	If yes, state the amount thereof at December 31 of current year:  12.61 Letters of credit  12.62 Collateral and other funds			
	Largest net aggregate amount insured in any one risk (excluding workers' compensation):	\$		
	Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?  State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.	_	-	No [ X ]

# **GENERAL INTERROGATORIES**

### PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

	Is the company a cedant in a multiple cedant reinsurance contract?  If yes, please describe the method of allocating and recording reinsurance among the cedants:						Yes [	]	No [X]
14.4	If the answer to 14.1 is yes, are the r If the answer to 14.3 is no, are all the If the answer to 14.4 is no, please ex	e methods described in 14.2	•	•	cedant reinsurance contra	acts?	Yes [ Yes [	-	No [ ]
	Has the reporting entity guaranteed a lf yes, give full information:	any financed premium accou	unts?					]	No [X]
16.1	Does the reporting entity write any w	•					Yes[ ]	]	No [X]
		1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned			
	16.11 Home								
	16.12 Products						.]		
	16.13 Automobile						<u>.</u>		
	16.14 Other*  * Disclose type of coverage:						<u>.</u>		
17.1	Does the reporting entity include amm Incurred but not reported losses on of Provide the following information for 17.11 Gross amount of unauthorize	contracts in force prior to July this exemption:	y 1, 1984, and not subse	quently renewed are ex			Yes [	]	No [X]
	17.12 Unfunded portion of Interrogatory 17.11								
	17.13 Paid losses and loss adjustme	ent expenses portion of Inte	rrogatory 17.11						
	17.14 Case reserves portion of Inter	= -							
	17.15 Incurred but not reported port								
	<ul><li>17.16 Unearned premium portion of</li><li>17.17 Contingent commission portion</li></ul>	= -							
	Provide the following information for	• •	n Schedule F-Part 3 and	excluded from Schedul	le F-Part 5, not included	above:	***************************************		
	17.18 Gross amount of unauthorize	d reinsurance in Schedule F	-Part 3 excluded from S	chedule F-Part 5					
	17.19 Unfunded portion of Interroga	•							
	17.20 Paid losses and loss adjustme		rrogatory 17.18						
	<ul><li>17.21 Case reserves portion of Inter</li><li>17.22 Incurred but not reported port</li></ul>	• •							
	17.23 Unearned premium portion of								
	17.24 Contingent commission portion	· ,							
	Do you act as a custodian for health		,, , , ,				Yes[	]	No [X]
	If yes, please provide the amount of Do you act as an administrator for he		e reporting date.				Yes [	 1	1 old
	If yes, please provide the balance of	=	of the reporting date.					-	No [ X ]

# Annual Statement for the year 2013 of the MedMal Direct Insurance Company **FIVE-YEAR HISTORICAL DATA**

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	Snow amounts in whole dollars only, no cents; sh	1 1	2	3	4	5
		2013	2012	ა 2011	4 2010	2009
1.	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
2.	Property lines (Lines 1, 2, 9, 12, 21 & 26)				1,141,310	
3.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
4.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6.	Total (Line 35)				1,141,316	
0.	Net Premiums Written (Page 8, Part 1B, Col. 6)					
7.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	10,512,224	7,819,506	3,417,475	1,141,316	
8.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
11.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12.	Total (Line 35)	10,512,224	7,819,506	3,417,475	1,141,316	0
	Statement of Income (Page 4)					
13.	Net underwriting gain (loss) (Line 8)					
14.	Net investment gain (loss) (Line 11)					
15.	Total other income (Line 15)					
16.	Dividends to policyholders (Line 17)					
17.	Federal and foreign income taxes incurred (Line 19)					
18.	Net income (Line 20)	773,046	(577,768)	(1,287,195)	(609,200)	0
4.0	Balance Sheet Lines (Pages 2 and 3)	22 22 4 252	4= 400 004	0.444.044	0.404.00=	
19.	Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	22,934,956	17,468,994	9,114,314	6,134,267	
20.	Premiums and considerations (Page 2, Col. 3):					
	20.1 In course of collection (Line 15.1)					
	20.2 Deferred and not yet due (Line 15.2)					
	20.3 Accrued retrospective premiums (Line 15.3)					
21.	Total liabilities excluding protected cell business (Page 3, Line 26)					
22.	Losses (Page 3, Line 1)		3,032,863	1,104,647		
23.	Loss adjustment expenses (Page 3, Line 3)		896,208	293,662		
24.	Unearned premiums (Page 3, Line 9)		3,729,733	2,179,048		
25.	Capital paid up (Page 3, Lines 30 & 31)		9,500,120	7,000,000		
26.	Surplus as regards policyholders (Page 3, Line 37)	10,450,483	8,921,079	5,513,527	5,001,205	
27	Cash Flow (Page 5)	4 505 404	1 422 226	1 0 4 7 4 6 9	052 025	
27.	Net cash from operations (Line 11)	4,595,494	1,433,330	1,047,400	255,255	
28.	Total adjusted capital	10 450 493	g 021 070	5 513 537	5,001,205	
29.	Authorized control level risk-based capital				363,718	
23.	Percentage Distribution of Cash, Cash Equivalents and Invested Assets	2,001,321	1,735,579	1,000,990		
	(Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30.	Bonds (Line 1)			50.6	47.1	
31.	Stocks (Lines 2.1 & 2.2)	11.7	11.3	9.8	3.3	
32.	Mortgage loans on real estate (Lines 3.1 & 3.2)					
33.	Real estate (Lines 4.1, 4.2 & 4.3)					
34.	Cash, cash equivalents and short-term investments (Line 5)					
35.	Contract loans (Line 6)					
36.	Derivatives (Line 7)					
37.	Other invested assets (Line 8)					
38.	Receivable for securities (Line 9)					
39.	Securities lending reinvested collateral assets (Line 10)					
40.	Aggregate write-ins for invested assets (Line 11)					
41.	Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	0.0
	Investments in Parent, Subsidiaries and Affiliates					
42.	Affiliated bonds (Sch. D, Summary, Line 12, Col. 1)					
43.	Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)					
44.	Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)					
45.	Affiliated snort-term investments (subtotals included in Schedule DA, Verification, Column 5, Line 10)					
10	Affiliated mortgage loans on real estate					
46. 47.	Affiliated mortgage loans on real estate					
47.	Total of above lines 42 to 47					
40.	Total investment in parent included in Lines 42 to 47 above					
50.	Percentage of investments in parent, subsidiaries and affiliates to surplus					
	as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	0.0				
	The state of the s					

# Annual Statement for the year 2013 of the MedMal Direct Insurance Company **FIVE-YEAR HISTORICAL DATA**

(Continued)

	(CONUI)			2	4	-
		1	2	3	4	5
		2013	2012	2011	2010	2009
	Capital and Surplus Accounts (Page 4)					
51.	Net unrealized capital gains (losses) (Line 24)	(233,472)	(28,515)	14,948	5,547	
52.	Dividends to stockholders (Line 35)					
53.	Change in surplus as regards policyholders for the year (Line 38)	1,529,403	3,407,552	512,322	5,001,205	
54.	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	729,000	893,000			
55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
57.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59.	Total (Line 35)	729,000	893,000	0	0	0
	Net Losses Paid (Page 9, Part 2, Col. 4)					
60.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	729,000	893,000			
61.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
63.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65.	Total (Line 35)	729,000	893,000	0	0	0
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67.	Losses incurred (Line 2)	38.5	45.0	46.6	45.0	
68.	Loss expenses incurred (Line 3)	21.1	20.0	20.7	20.0	
69.	Other underwriting expenses incurred (Line 4)	39.3	53.2	99.6	320.6	
70.	Net underwriting gain (loss) (Line 8)	1.1	(18.2)	(66.9)	(285.6)	
	Other Percentages					
71.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	35.7	42.4	61.7	63.9	
72.	Losses and loss expenses incurred to premiums earned					
	(Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	59.5	65.0	67.3	65.0	
73.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 37, Col. 1 x 100.0)	100.6	87.7	62.0	22.8	
	One Year Loss Development (000 omitted)					
74.	Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)	(622)	(38)	5		
75.	Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100)	(7.0)	(0.7)	0.1		
	Two Year Loss Development (000 omitted)					
76.	Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12)	(482)	(3)			
77.	Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end	(0.7)	(0.4)			
	(Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	(ö./)	(U.1)			

If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of		
SSAP No. 3, Accounting Changes and Correction of Errors?	Yes[]	No [
If no, please explain:		

# SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES

# **SCHEDULE P - PART 1 - SUMMARY**

(\$000 Omitted)

	F	Premiums Earne	d			Loss and	Loss Expense	Payments				12
Years in Which	1	2	3				and Cost	Adjusting		10	11	Number
Premiums				Loss Pa	ayments	Containmer	nt Payments	Payn	nents			of
Were				4	5	6	7	8	9	Salvage	Total	Claims
Earned and	Direct			Direct		Direct		Direct		and	Net Paid	Reported-
Losses Were	and		Net	and		and		and		Subrogation	(Cols. 4 - 5 +	Direct and
Incurred	Assumed	Ceded	(Cols. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	6 - 7 + 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX								0	XXX
2. 2004			0								0	XXX
3. 2005			0								0	XXX
4. 2006			0								0	XXX
5. 2007			0								0	XXX
6. 2008			0								0	XXX
7. 2009			0								0	XXX
8. 2010	231		231			132		19			151	XXX
9. 2011	2,398	250	2,148	275		398		56			729	XXX
10. 2012	6,570	301	6,269	1,078		681		168			1,927	XXX
11. 2013	9,961	428	9,533	269		520		161			950	XXX
12. Totals	XXX	XXX	XXX	1,622	0	1,731	0	404	0	0	3,757	XXX

										Adjusting	and Other	23	24	25
			Losses	Unpaid		Defer	nse and Cost (	Containment U	Inpaid		paid	20	Total	20
		Case	Basis	Bulk +	· IBNR		Basis		- IBNR	21	22		Net	Number of
		13	14	15	16	17	18	19	20			Salvage	Losses	Claims
		Direct		Direct		Direct		Direct		Direct		and	and	Outstanding-
		and		and		and		and		and		Subrogation	Expenses	Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior												0	XXX
2.	2004												0	XXX
3.	2005												0	XXX
4.	2006												0	XXX
5.	2007												0	XXX
6.	2008												0	XXX
7.	2009												0	XXX
8.	2010												0	XXX
9.	2011	150		90		13		34		5			292	XXX
10.	2012	1,065		649		131		177		29			2,051	XXX
11.	2013	1,610		2,409		219		811		197			5,246	XXX
12.	Totals	2,825	0	3,148	0	363	0	1,022	0	231	0	0	7,589	XXX

Г										34		
			Total Losses and	i	Loss and	Loss Expense P	ercentage	Nonta	abular	34	Net Balar	nce Sheet
			s Expenses Incu			red/Premiums Ea		Disc	ount		Reserves after	
		26	27	28	29	30	31	32	33	Inter-Company	35	36
		Direct			Direct					Pooling		Loss
		and	0 1 1		and	0 1 1			Loss	Participation	Losses	Expenses
Ļ		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	0	0
	2. 2004.	0	0	0	0.0	0.0	0.0				0	0
	3. 2005.	0	0	0	0.0	0.0	0.0				0	0
	4. 2006.	0	0	0	0.0	0.0	0.0				0	0
	5. 2007.	0	0	0	0.0	0.0	0.0				0	0
	6. 2008.	0	0	0	0.0	0.0	0.0				0	0
	7. 2009.	0	0	0	0.0	0.0	0.0				0	0
	8. 2010.	151	0	151	65.4	0.0	65.4				0	0
	9. 2011.	1,021	0	1,021	42.6	0.0	47.5				240	52
	10. 2012.	3,978	0	3,978	60.5	0.0	63.5				1,714	337
L	11. 2013.	6,196	0	6,196	62.2	0.0	65.0				4,019	1,227
	12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	5,973	1,616

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements, which will reconcile Part 1 with Parts 2 and 4.

# **SCHEDULE P - PART 2 - SUMMARY**

		Incurre	ed Net Losses a	nd Defense and	d Cost Containr	ment Expenses	Reported at Ye	ar End (\$000 o	mitted)		DEVELO	PMENT
1	1	2	3	4	5	6	7	8	9	10	11	12
Years in Which Losses Were Incurred	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	One Year	Two Year
1. Prior											0	
2. 2004											0	
3. 2005	XXX										0	
4. 2006	XXX	XXX									0	
5. 2007	XXX	XXX	XXX								0	
6. 2008	XXX	XXX	XXX	XXX							0	
7. 2009	XXX	XXX	XXX	XXX	XXX						0	
3. 2010	XXX	XXX	XXX	XXX	XXX	XXX	147	152	144	132	(12)	(2
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,422	1,392	960	(432)	(46
0. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,959	3,781	(178)	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,838	XXX	XXX
										12 Totals	(622)	(4

# **SCHEDULE P - PART 3 - SUMMARY**

	ı											
		Cumulative	e Paid Net Loss	es and Defense	e and Cost Con	tainment Expen	ses Reported a	t Year End (\$00	00 omitted)		11	12
	1	2	3	4	5	6	7	8	9	10		Number of
											Number of	Claims
Years in											Claims	Closed
Which											Closed With	Without
Losses Were											Loss	Loss
Incurred	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	Payment	Payment
iliculted	2004	2003	2000	2001	2000	2003	2010	2011	2012	2010	1 dyllicht	1 dyllicit
1. Prior	000										XXX	XXX
2. 2004											XXX	XXX
3. 2005	XXX										XXX	XXX
o. 2000												
4. 2006	XXX	XXX										
5. 2007	XXX	XXX	XXX								XXX	XXX
6. 2008	XXX	XXX	XXX	XXX							XXX	XXX
7. 2009	XXX	XXX	VVV	XXX	VVV						XXX	XXX
7. 2003												
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX		54	78	132	XXX	XXX
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	143	324	673	XXX	XXX
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1.235	1 759	XXX	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	789	XXX	XXX

### SCHEDULE P - PART 4 - SUMMARY

			ЭСПЕ	DULEP	- PARI 4	4 - 20MM	IAKT			
		Bulk and	IBNR Reserves	on Net Losses and	Defense and Cos	t Containment Ex	penses Reported a	at Year End (\$000	omitted)	
	1	2	3	4	5	6	7	8	9	10
Years in Which Losses Were Incurred	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior										
2. 2004										
3. 2005	XXX									
4. 2006	XXX	XXX								
5. 2007	XXX	XXX	XXX							
6. 2008	XXX	XXX	XXX	XXX						
7. 2009	XXX	XXX	XXX	XXX	XXX					
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	137	92	64	
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,162	590	124
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,958	826
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,220

# Annual Statement for the year 2013 of the **MedMal Direct Insurance Company** SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

	Allocated by States and Territories									
		1	Gross Premiums, I Membership Fees Le and Premiums on 2	ncluding Policy and ess Return Premiums	4 Dividends Paid or Credited to Policyholders	5 Direct Losses Paid	6	7	8 Finance and Service Charges	9 Direct Premiums Written for Federal Pur-
	States, Etc.	Active Status	Direct Premiums Written	Direct Premiums Earned	on Direct Business	(Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	not Included in Premiums	chasing Groups (Incl. in Col. 2)
	AlabamaAL	N								
2.	AlaskaAK	N								
3.	ArizonaAZ	N								
4.	ArkansasAR									
5.	CaliforniaCA									
6.	ColoradoCO									
7.	ConnecticutCT DelawareDE	N								
8.	District of ColumbiaDC									
9. 10.	FloridaFL		10,435,994	9,324,178		729,000	3,689,347	5,878,809		
11.	GeorgiaGA		481,660	9,324,176		729,000	92.953	92,953		
12.	HawaiiHl	N	401,000	200,501			92,933	92,933		
13.	IdahoID	N								
14.	IllinoisIL	N								
15.	IndianaIN									
16.	lowaIA	N								
17.	KansasKS	N								
18.	KentuckyKY	N								
19.	LouisianaLA	N								
20.	MaineME									
21.	MarylandMD									
22.	MassachusettsMA									
23.	MichiganMI	N								
24.	MinnesotaMN	N								
25.	MississippiMS	N								
26.	MissouriMO									
27.	MontanaMT									
28.	NebraskaNE									
29.	NevadaNV	N								
30.	New HampshireNH	N								
31.	New JerseyNJ									
32.	New MexicoNM									
33.	New YorkNY	N								
34.	North CarolinaNC	L								
35.	North DakotaND									
36.	OhioOH	N								
37.	OklahomaOK	N								
38.		N			•••••					
	PennsylvaniaPA									
40.	Rhode IslandRl	N								
41.	South CarolinaSC South DakotaSD	N								
42. 43.	TennesseeTN	N								
44.	TexasTX	N	22,820	2.250			1.012	1.012		
44. 45.	UtahUT		22,020	∠,∠ა∪			1,012	1,012		
46.	VermontVT	N								
47.	VirginiaVA	N								
48.	WashingtonWA	N								
49.	West VirginiaWV	N								
50.	WisconsinWI	N								
51.	WyomingWY	N								
52.	American SamoaAS									
53.	GuamGU									
54.	Puerto RicoPR	N								
55.	US Virgin IslandsVI	N								
56.	Northern Mariana IslandsMP	N								
57.	CanadaCAN	N								
58.	Aggregate Other AlienOT	XXX	0	0	0	0	0	0	0	0
59.	Totals	(a)4	10,940,474	9,532,989	0	729,000	3,783,312	5,972,774	0	0
				DETA	ILS OF WRITE-IN	IS	ı	i	ı	1
58001.		XXX								
58002.		XXX								
58003.		XXX								
58998.	Summary of remaining write-ins for	XXX	^	^	0	0	0	^	^	
58999	Line 58 from overflow page Totals (Lines 58001 thru 58003+	^^^	0	0	0	0	0	0	0	0
	Line 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0

# Physicians Trust, LLC

FEIN: 26-4410870

owns 100% of

# MedMal Direct Insurance Group, LLC

FEIN: 26-2010975

owns 100% of

# MedMal Direct Insurance Company

FEIN: 27-2813188 NAIC Company Code: 13793 State of Domicile: FL

# 2013 ALPHABETICAL INDEX -- PROPERTY & CASUALTY ANNUAL STATEMENT BLANK

Assets	2	Schedule P-Part 2G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	58
Cash Flow	5	Schedule P-Part 2H-Section 1-Other Liability-Occurrence	58
Exhibit of Capital Gains (Losses)	12	Schedule P–Part 2H–Section 2–Other Liability–Claims–Made	58
Exhibit of Net Investment Income	12	Schedule P-Part 2I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	59
Exhibit of Nonadmitted Assets Exhibit of Premiums and Losses (State Page)	13 19	Schedule P–Part 2J–Auto Physical Damage Schedule P–Part 2K–Fidelity, Surety	59 59
Five-Year Historical Data	17	Schedule P–Part 2L–Other (Including Credit, Accident and Health)	59
General Interrogatories	15	Schedule P-Part 2M-International	59
Jurat Page Liabilities, Surplus and Other Funds	3	Schedule P–Part 2N–Reinsurance – Nonproportional Assumed Property  Schedule P–Part 2O–Reinsurance – Nonproportional Assumed Liability	60 60
Notes To Financial Statements	14	Schedule P–Part 2P–Reinsurance – Nonproportional Assumed Financial Lines	60
Overflow Page For Write-ins	100	Schedule P–Part 2R–Section 1–Products Liability–Occurrence	61
Schedule A-Part 1	E01	Schedule P-Part 2R-Section 2-Products Liability-Claims-Made	61
Schedule A-Part 2 Schedule A-Part 3	E02 E03	Schedule P–Part 2S–Financial Guaranty/Mortgage Guaranty Schedule P–Part 2T–Warranty	61 61
Schedule A-Verification Between Years	SI02	Schedule P-Part 3A-Homeowners/Farmowners	62
Schedule B-Part 1	E04	Schedule P–Part 3B–Private Passenger Auto Liability/Medical	62
Schedule B-Part 2 Schedule B-Part 3	E05 E06	Schedule P–Part 3C–Commercial Auto/Truck Liability/Medical Schedule P–Part 3D–Workers' Compensation (Excluding Excess Workers Compensation)	62 62
Schedule B-Verification Between Years	SI02	Schedule P-Part 3E-Commercial Multiple Peril	62
Schedule BA-Part 1	E07	Schedule P-Part 3F-Section 1 -Medical Professional Liability-Occurrence	63
Schedule BA-Part 2	E08	Schedule P-Part 3F-Section 2-Medical Professional Liability-Claims-Made	63
Schedule BA-Part 3 Schedule BA-Verification Between Years	E09 SI03	Schedule P–Part 3G–Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery) Schedule P–Part 3H–Section 1–Other Liability–Occurrence	63 63
Schedule D-Part 1	E10	Schedule P-Part 3H-Section 2-Other Liability-Claims-Made	63
Schedule D-Part 1A-Section 1	SI05	Schedule P-Part 3I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	64
Schedule D-Part 1A-Section 2	SI08	Schedule P–Part 3J–Auto Physical Damage	64
Schedule D-Part 2-Section 1 Schedule D-Part 2-Section 2	E11 E12	Schedule P–Part 3K–Fidelity/Surety Schedule P–Part 3L–Other (Including Credit, Accident and Health)	64 64
Schedule D-Part 3	E13	Schedule P-Part 3M-International	64
Schedule D-Part 4	E14	Schedule P-Part 3N-Reinsurance - Nonproportional Assumed Property	65
Schedule D-Part 5	E15	Schedule P-Part 30-Reinsurance - Nonproportional Assumed Liability	65
Schedule D-Part 6-Section 1 Schedule D-Part 6-Section 2	E16	Schedule P–Part 3P–Reinsurance – Nonproportional Assumed Financial Lines Schedule P–Part 3R–Section 1–Products Liability–Occurrence	65 66
Schedule D-Part o-Section 2 Schedule D-Summary By Country	SI04	Schedule P-Part 3R-Section 1-Products Liability-Occurrence Schedule P-Part 3R-Section 2-Products Liability-Claims-Made	66
Schedule D-Verification Between Years	SI03	Schedule P-Part 3S-Financial Guaranty/Mortgage Guaranty	66
Schedule DA-Part 1	E17	Schedule P-Part 3T-Warranty	66
Schedule DA-Verification Between Years Schedule DB-Part A-Section 1	SI10 E18	Schedule P–Part 4A–Homeowners/Farmowners Schedule P–Part 4B–Private Passenger Auto Liability/Medical	67 67
Schedule DB-Part A-Section 2	E19	Schedule P–Part 4C–Commercial Auto/Truck Liability/Medical	67
Schedule DB-Part A-Verification Between Years	SI11	Schedule P-Part 4D-Workers' Compensation (Excluding Excess Workers Compensation)	67
Schedule DB-Part B-Section 1	E20	Schedule P–Part 4E–Commercial Multiple Peril	67
Schedule DB-Part B-Section 2 Schedule DB-Part B-Verification Between Years	E21 SI11	Schedule P–Part 4F–Section 1–Medical Professional Liability–Occurrence Schedule P–Part 4F–Section 2–Medical Professional Liability–Claims-Made	68 68
Schedule DB-Part C-Section 1	SI12	Schedule P-Part 4G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	68
Schedule DB-Part C-Section 2	SI13	Schedule P–Part 4H–Section 1–Other Liability–Occurrence	68
Schedule DB-Part D-Section 1	E22	Schedule P-Part 4H-Section 2-Other Liability-Claims-Made	68
Schedule DB-Part D-Section 2 Schedule DB-Verification	E23 SI14	Schedule P–Part 4I–Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) Schedule P–Part 4J–Auto Physical Damage	69 69
Schedule DL-Part 1	E24	Schedule P-Part 4K-Fidelity/Surety	69
Schedule DL-Part 2	E25	Schedule P–Part 4L–Other (Including Credit, Accident and Health)	69
Schedule E-Part 1-Cash	E26	Schedule P-Part 4M-International	69
Schedule E-Part 2-Cash Equivalents Schedule E-Part 3-Special Deposits	E27 E28	Schedule P–Part 4N–Reinsurance – Nonproportional Assumed Property  Schedule P–Part 4O–Reinsurance – Nonproportional Assumed Liability	70 70
Schedule E-Verification Between Years	SI15	Schedule P-Part 4P-Reinsurance – Nonproportional Assumed Financial Lines	70
Schedule F-Part 1	20	Schedule P-Part 4R-Section 1-Products Liability-Occurrence	71
Schedule F-Part 2	21	Schedule P-Part 4R-Section 2-Products Liability-Claims-Made	71
Schedule F–Part 3 Schedule F–Part 4	22	Schedule P–Part 4S–Financial Guaranty/Mortgage Guaranty Schedule P–Part 4T–Warranty	71 71
Schedule F-Part 5	24	Schedule P-Part 5A-Homeowners/Farmowners	72
Schedule F-Part 6-Section 1	25	Schedule P–Part 5B–Private Passenger Auto Liability/Medical	73
Schedule F–Part 6-Section 2 Schedule F–Part 7	26 27	Schedule P–Part 5C–Commercial Auto/Truck Liability/Medical Schedule P–Part 5D–Workers' Compensation (Excluding Excess Workers Compensation)	74 75
Schedule F-Part 8	28	Schedule P-Part 5E-Commercial Multiple Peril	76
Schedule F-Part 9	29	Schedule P–Part 5F–Medical Professional Liability–Claims-Made	78
Schedule H-Accident and Health Exhibit-Part 1	30	Schedule P-Part 5F-Medical Professional Liability-Occurrence	77
Schedule H–Part 2, Part 3 and Part 4 Schedule H–Part 5–Health Claims	31 32	Schedule P–Part 5H–Other Liability–Claims-Made Schedule P–Part 5H–Other Liability–Occurrence	80 79
Schedule P-Part 1-Summary	33	Schedule P-Part 5R-Products Liability-Claims-Made	82
Schedule P-Part 1A-Homeowners/Farmowners	35	Schedule P-Part 5R-Products Liability-Occurrence	81
Schedule P-Part 1B-Private Passenger Auto Liability/Medical	36	Schedule P-Part 5T-Warranty	83
Schedule P–Part 1C–Commercial Auto/Truck Liability/Medical Schedule P–Part 1D–Workers' Compensation (Excluding Excess Workers Compensation)	37 38	Schedule P–Part 6C–Commercial Auto/Truck Liability/Medical Schedule P–Part 6D–Workers' Compensation (Excluding Excess Workers Compensation)	84 84
Schedule P-Part 1E-Commercial Multiple Peril	39	Schedule P-Part 6E-Commercial Multiple Peril	85
Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence	40	Schedule P-Part 6H-Other Liability-Claims-Made	86
Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made	41	Schedule P-Part 6H-Other Liability-Occurrence	85
Schedule P–Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery)  Schedule P–Part 1H–Section 1–Other Liability–Occurrence	42	Schedule P–Part 6M–International Schedule P–Part 6N–Reinsurance – Nonproportional Assumed Property	86 87
Schedule P-Part 1H-Section 2-Other Liability-Octamende  Schedule P-Part 1H-Section 2-Other Liability-Claims-Made	44	Schedule P-Part 60-Reinsurance - Nonproportional Assumed Froperty  Schedule P-Part 60-Reinsurance - Nonproportional Assumed Liability	87
Schedule P-Part 1I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	45	Schedule P-Part 6R-Products Liability-Claims-Made	88
Schedule P-Part 1J-Auto Physical Damage	46	Schedule P-Part 6R-Products Liability-Occurrence	88
Schedule P–Part 1K–Fidelity/Surety Schedule P–Part 1L–Other (Including Credit, Accident and Health)	47 48	Schedule P–Part 7A–Primary Loss Sensitive Contracts Schedule P–Part 7B–Reinsurance Loss Sensitive Contracts	89 91
Schedule P-Part 1M-International	49	Schedule P Interrogatories	93
Schedule P-Part 1N-Reinsurance - Nonproportional Assumed Property	50	Schedule T-Exhibit of Premiums Written	94
Schedule P-Part 10-Reinsurance - Nonproportional Assumed Liability	51	Schedule T-Part 2-Interstate Compact	95
Schedule P–Part 1P–Reinsurance – Nonproportional Assumed Financial Lines Schedule P–Part 1R–Section 1–Products Liability–Occurrence	52 53	Schedule Y–Information Concerning Activities of Insurer Members of a Holding Company Group Schedule Y–Detail of Insurance Holding Company System	96 97
Schedule P-Part 1R-Section 1-Products Liability-Occurrence  Schedule P-Part 1R-Section 2-Products Liability-Claims-Made	54	Schedule Y-Detail of Insurance Holding Company System  Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates	98
Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty	55	Statement of Income	4
Schedule P-Part 1T-Warranty	56	Summary Investment Schedule	SI01
Schedule P–Part 2, Part 3 and Part 4 - Summary Schedule P–Part 2A–Homeowners/Farmowners	34 57	Supplemental Exhibits and Schedules Interrogatories  Underwriting and Investment Exhibit Part 1	99
Schedule P-Part 2B-Private Passenger Auto Liability/Medical	57	Underwriting and Investment Exhibit Part 1A	7
Schedule P-Part 2C-Commercial Auto/Truck Liability/Medical	57	Underwriting and Investment Exhibit Part 1B	8
Schedule P-Part 2D-Workers' Compensation (Excluding Excess Workers Compensation)	57	Underwriting and Investment Exhibit Part 2	9
Schedule P–Part 2E–Commercial Multiple Peril Schedule P–Part 2F–Section 1–Medical Professional Liability–Occurrence	57 58	Underwriting and Investment Exhibit Part 2A Underwriting and Investment Exhibit Part 3	10 11
Schedule P-Part 2F-Section 2-Medical Professional Liability-Occurrence  Schedule P-Part 2F-Section 2-Medical Professional Liability-Claims-Made	58	Shadh ming and informatic Exhibit Fair O	1 11
		•	