



ANNUAL STATEMENT

For the Year Ended December 31, 2009
of the Condition and Affairs of the

AMERICAN MEDICAL INSURANCE EXCHANGE

NAIC Group Code.....2698, 2698 (Current Period) (Prior Period)	NAIC Company Code..... 31402	Employer's ID Number..... 35-1756545
Organized under the Laws of IN	State of Domicile or Port of Entry IN	Country of Domicile US
Incorporated/Organized..... August 31, 1988	Commenced Business..... November 1, 1988	
Statutory Home Office	965 EMERSON PARKWAY, SUITE H..... GREENWOOD IN 46143 <i>(Street and Number) (City or Town, State and Zip Code)</i>	
Main Administrative Office	100 BROOKWOOD PLACE..... BIRMINGHAM AL 35209 <i>(Street and Number) (City or Town, State and Zip Code)</i>	205-877-4400 <i>(Area Code) (Telephone Number)</i>
Mail Address	PO BOX 590009..... BIRMINGHAM AL 35259-0009 <i>(Street and Number or P. O. Box) (City or Town, State and Zip Code)</i>	
Primary Location of Books and Records	100 BROOKWOOD PLACE..... BIRMINGHAM AL 35209 <i>(Street and Number) (City or Town, State and Zip Code)</i>	205-877-4400 <i>(Area Code) (Telephone Number)</i>
Internet Web Site Address	N/A	
Statutory Statement Contact	NOELLE L. MILBY <i>(Name)</i>	205-802-4735 <i>(Area Code) (Telephone Number) (Extension)</i>
	FinancialFilings@proassurance.com <i>(E-Mail Address)</i>	205-868-6367 <i>(Fax Number)</i>

OFFICERS

Name	Title	Name	Title
1. DARRYL KEITH THOMAS	PRESIDENT	2. KATHRYN ANNE NEVILLE	SECRETARY
3. EDWARD LEWIS RAND, JR.	TREASURER	4. WILLIAM STANCIL STARNES	CHAIRMAN
KELLY BOUNDS BREWER	VICE PRESIDENT	HOWARD HARLEY FRIEDMAN	VICE PRESIDENT
LOIS JEAN WYRICK	VICE PRESIDENT		

OTHER

DIRECTORS OR TRUSTEES

VICTOR THOMAS ADAMO	HOWARD HARLEY FRIEDMAN	EDWARD LEWIS RAND, JR.	WILLIAM STANCIL STARNES
DARRYL KEITH THOMAS	LOIS JEAN WYRICK		

State of..... ALABAMA
County of..... JEFFERSON

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

_____ (Signature) DARRYL KEITH THOMAS	_____ (Signature) KATHRYN ANNE NEVILLE	_____ (Signature) EDWARD LEWIS RAND, JR.
1. (Printed Name) PRESIDENT	2. (Printed Name) SECRETARY	3. (Printed Name) TREASURER
_____ (Title)	_____ (Title)	_____ (Title)

Subscribed and sworn to before me
This _____ day of _____ 2010

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

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	101,841		101,841	103,912
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			.0	
2.2 Common stocks.....			.0	
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			.0	
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 (\$.....16,812, Sch. E-Part 1), cash equivalents (\$.....449,984, Sch. E-Part 2) and short-term investments (\$.....5,580, Sch. DA).....	472,377		472,377	469,855
6. Contract loans (including \$.....0 premium notes).....			.0	
7. Other invested assets (Schedule BA).....			.0	
8. Receivables for securities.....			.0	
9. Aggregate write-ins for invested assets.....	.0	.0	.0	.0
10. Subtotals, cash and invested assets (Lines 1 to 9).....	574,218	.0	574,218	573,767
11. Title plants less \$.....0 charged off (for Title insurers only).....			.0	
12. Investment income due and accrued.....	584		584	588
13. Premiums and considerations:				
13.1 Uncollected premiums and agents' balances in course of collection.....			.0	
13.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			.0	
13.3 Accrued retrospective premiums.....			.0	
14. Reinsurance:				
14.1 Amounts recoverable from reinsurers.....			.0	
14.2 Funds held by or deposited with reinsured companies.....			.0	
14.3 Other amounts receivable under reinsurance contracts.....			.0	
15. Amounts receivable relating to uninsured plans.....			.0	
16.1 Current federal and foreign income tax recoverable and interest thereon.....	1,289		1,289	2,866
16.2 Net deferred tax asset.....			.0	
17. Guaranty funds receivable or on deposit.....			.0	
18. Electronic data processing equipment and software.....			.0	
19. Furniture and equipment, including health care delivery assets (\$.....0).....			.0	
20. Net adjustment in assets and liabilities due to foreign exchange rates.....			.0	
21. Receivables from parent, subsidiaries and affiliates.....			.0	
22. Health care (\$.....0) and other amounts receivable.....			.0	
23. Aggregate write-ins for other than invested assets.....	4	.0	4	250
24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 10 to 23).....	576,095	.0	576,095	577,471
25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.0	
26. TOTALS (Lines 24 and 25).....	576,095	.0	576,095	577,471

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
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.0	.0	.0	.0
2301. State Income Tax Recoverable.....	4		4	250
2302.....			.0	
2303.....			.0	
2398. Summary of remaining write-ins for Line 23 from overflow page.....	.0	.0	.0	.0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	4	.0	4	250

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8).....		
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).....		
4. Commissions payable, contingent commissions and other similar charges.....		
5. Other expenses (excluding taxes, licenses and fees).....	10,523	5,499
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....		
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....		
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).....		
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 (Schedule F, Part 7).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....		
20. Payable for securities.....		
21. Liability for amounts held under uninsured plans.....		
22. Capital notes \$.....0 and interest thereon \$.....0.....		
23. Aggregate write-ins for liabilities.....	0	0
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23).....	10,523	5,499
25. Protected cell liabilities.....		
26. Total liabilities (Lines 24 and 25).....	10,523	5,499
27. Aggregate write-ins for special surplus funds.....	0	0
28. Common capital stock.....		
29. Preferred capital stock.....		
30. Aggregate write-ins for other than special surplus funds.....	865,000	865,000
31. Surplus notes.....		
32. Gross paid in and contributed surplus.....		
33. Unassigned funds (surplus).....	(299,428)	(293,028)
34. Less treasury stock, at cost:		
34.1 .....0.000 shares common (value included in Line 28 \$.....0).....		
34.2 .....0.000 shares preferred (value included in Line 29 \$.....0).....		
35. Surplus as regards policyholders (Lines 27 to 33, less 34) (Page 4, Line 39).....	565,572	571,972
36. TOTALS (Page 2, Line 26, Col. 3).....	576,095	577,471

DETAILS OF WRITE-INS

2301.		
2302.		
2303.		
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	0	0
2701.		
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above).....	0	0
3001. Guaranty Fund.....	865,000	865,000
3002.		
3003.		
3098. Summary of remaining write-ins for Line 30 from overflow page.....	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above).....	865,000	865,000

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....		
DEDUCTIONS		
2. Losses incurred (Part 2, Line 35, Column 7).....		
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....		
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	10,199	11,610
5. Aggregate write-ins for underwriting deductions.....	0	0
6. Total underwriting deductions (Lines 2 through 5).....	10,199	11,610
7. Net income of protected cells.....		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7).....	(10,199)	(11,610)
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	2,713	14,234
10. Net realized capital gains (losses) less capital gains tax of \$.....0 (Exhibit of Capital Gains (Losses)).....		41
11. Net investment gain (loss) (Lines 9 + 10).....	2,713	14,275
OTHER INCOME		
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	0
15. Total other income (Lines 12 through 14).....	0	0
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	(7,486)	2,665
17. Dividends to policyholders.....		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	(7,486)	2,665
19. Federal and foreign income taxes incurred.....	(1,086)	362
20. Net income (Line 18 minus Line 19) (to Line 22).....	(6,400)	2,303
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	571,972	569,669
22. Net income (from Line 20).....	(6,400)	2,303
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0.....		
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....		
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 26 Column 3).....		
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....		
29. Change in surplus notes.....		
30. Surplus (contributed to) withdrawn from protected cells.....		
31. Cumulative effect of changes in accounting principles.....		
32. Capital changes:		
32.1 Paid in.....		
32.2 Transferred from surplus (Stock Dividend).....		
32.3 Transferred to surplus.....		
33. Surplus adjustments:		
33.1 Paid in.....		
33.2 Transferred to capital (Stock Dividend).....		
33.3. Transferred from capital.....		
34. Net remittances from or (to) Home Office.....		
35. Dividends to stockholders.....		
36. Change in treasury stock (Page 3, Lines 34.1 and 34.2, Column 2 minus Column 1).....		
37. Aggregate write-ins for gains and losses in surplus.....	0	0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	(6,400)	2,303
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 35).....	565,572	571,972
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0
1401. Miscellaneous.....		
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	0	0
3701.		
3702.		
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0

CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....		
2. Net investment income.....	4,788	16,056
3. Miscellaneous income.....		
4. Total (Lines 1 through 3).....	4,788	16,056
5. Benefit and loss related payments.....		
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	5,175	6,168
8. Dividends paid to policyholders.....		
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	(2,663)	3,000
10. Total (Lines 5 through 9).....	2,512	9,168
11. Net cash from operations (Line 4 minus Line 10).....	2,276	6,888
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....		100,000
12.2 Stocks.....		
12.3 Mortgage loans.....		
12.4 Real estate.....		
12.5 Other invested assets.....		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....		41
12.7 Miscellaneous proceeds.....		
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	0	100,041
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....		105,281
13.2 Stocks.....		
13.3 Mortgage loans.....		
13.4 Real estate.....		
13.5 Other invested assets.....		
13.6 Miscellaneous applications.....		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	0	105,281
14. Net increase (decrease) in contract loans and premium notes.....		
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	0	(5,240)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....		
16.2 Capital and paid in surplus, less treasury stock.....		
16.3 Borrowed funds.....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....		
16.5 Dividends to stockholders.....		
16.6 Other cash provided (applied).....	246	(251)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	246	(251)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	2,522	1,397
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	469,856	468,459
19.2 End of year (Line 18 plus Line 19.1).....	472,378	469,856

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

20.0001		
---------------	--	--

**Pt. 1-Premiums Earned
NONE**

**Pt. 1A-Recapitulation of All Premiums
NONE**

**Pt. 1B-Premiums Written
NONE**

**Pt. 2-Losses Paid & Incurred
NONE**

**Pt. 2A-Unpaid Losses & LAE
NONE**

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct.....				0
1.2 Reinsurance assumed.....				0
1.3 Reinsurance ceded.....				0
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3).....	0	0	0	0
2. Commission and brokerage:				
2.1 Direct, excluding contingent.....				0
2.2 Reinsurance assumed, excluding contingent.....				0
2.3 Reinsurance ceded, excluding contingent.....				0
2.4 Contingent - direct.....				0
2.5 Contingent - reinsurance assumed.....				0
2.6 Contingent - reinsurance ceded.....				0
2.7 Policy and membership fees.....				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7).....	0	0	0	0
3. Allowances to manager and agents.....				0
4. Advertising.....				0
5. Boards, bureaus and associations.....				0
6. Surveys and underwriting reports.....				0
7. Audit of assureds' records.....				0
8. Salary and related items:				
8.1 Salaries.....				0
8.2 Payroll taxes.....				0
9. Employee relations and welfare.....				0
10. Insurance.....				0
11. Directors' fees.....				0
12. Travel and travel items.....				0
13. Rent and rent items.....				0
14. Equipment.....				0
15. Cost or depreciation of EDP equipment and software.....				0
16. Printing and stationery.....		996		996
17. Postage, telephone and telegraph, exchange and express.....				0
18. Legal and auditing.....				0
19. Totals (Lines 3 to 18).....	0	996	0	996
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$.....0.....				0
20.2 Insurance department licenses and fees.....		6,397		6,397
20.3 Gross guaranty association assessments.....		(312)		(312)
20.4 All other (excluding federal and foreign income and real estate).....		495		495
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4).....	0	6,580	0	6,580
21. Real estate expenses.....				0
22. Real estate taxes.....				0
23. Reimbursements by uninsured plans.....				0
24. Aggregate write-ins for miscellaneous expenses.....	0	2,623	614	3,237
25. Total expenses incurred.....	0	10,199	614	(a) 10,813
26. Less unpaid expenses - current year.....		10,000	523	10,523
27. Add unpaid expenses - prior year.....		5,000	499	5,499
28. Amounts receivable relating to uninsured plans, prior year.....				0
29. Amounts receivable relating to uninsured plans, current year.....				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29).....	0	5,199	590	5,789

DETAILS OF WRITE-INS

2401. Cash Management.....		2,623		2,623
2402. Portfolio Management.....			580	580
2403. Custodial Fees.....			34	34
2498. Summary of remaining write-ins for Line 24 from overflow page.....	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498) (Line 24 above).....	0	2,623	614	3,237

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

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....2,429	2,429
1.1 Bonds exempt from U.S. tax.....	(a).....	
1.2 Other bonds (unaffiliated).....	(a).....	
1.3 Bonds of affiliates.....	(a).....	
2.1 Preferred stocks (unaffiliated).....	(b).....	
2.11 Preferred stocks of affiliates.....	(b).....	
2.2 Common stocks (unaffiliated).....		
2.21 Common stocks of affiliates.....		
3. Mortgage loans.....	(c).....	
4. Real estate.....	(d).....	
5. Contract loans.....		
6. Cash, cash equivalents and short-term investments.....	(e).....903	899
7. Derivative instruments.....	(f).....	
8. Other invested assets.....		
9. Aggregate write-ins for investment income.....	0	0
10. Total gross investment income.....	3,331	3,327
11. Investment expenses.....		(g).....614
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).....		614
17. Net investment income (Line 10 minus Line 16).....		2,713

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 \$.....0 accrual of discount less \$.....2,071 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$.....871 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, attributable 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)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. government bonds.....			0		
1.1 Bonds exempt from U.S. tax.....			0		
1.2 Other bonds (unaffiliated).....			0		
1.3 Bonds of affiliates.....			0		
2.1 Preferred stocks (unaffiliated).....			0		
2.11 Preferred stocks of affiliates.....			0		
2.2 Common stocks (unaffiliated).....			0		
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	0	0	0	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
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	0	0	0	0	0

EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			.0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			.0
2.2 Common stocks.....			.0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			.0
3.2 Other than first liens.....			.0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			.0
4.2 Properties held for the production of income.....			.0
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).....			.0
6. Contract loans.....			.0
7. Other invested assets (Schedule BA).....			.0
8. Receivables for securities.....			.0
9. Aggregate write-ins for invested assets.....	.0	.0	.0
10. Subtotals, cash and invested assets (Lines 1 to 9).....	.0	.0	.0
11. Title plants (for Title insurers only).....			.0
12. Investment income due and accrued.....			.0
13. Premiums and considerations:			
13.1 Uncollected premiums and agents' balances in the course of collection.....			.0
13.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			.0
13.3 Accrued retrospective premiums.....			.0
14. Reinsurance:			
14.1 Amounts recoverable from reinsurers.....			.0
14.2 Funds held by or deposited with reinsured companies.....			.0
14.3 Other amounts receivable under reinsurance contracts.....			.0
15. Amounts receivable relating to uninsured plans.....			.0
16.1 Current federal and foreign income tax recoverable and interest thereon.....			.0
16.2 Net deferred tax asset.....			.0
17. Guaranty funds receivable or on deposit.....			.0
18. Electronic data processing equipment and software.....			.0
19. Furniture and equipment, including health care delivery assets.....			.0
20. Net adjustment in assets and liabilities due to foreign exchange rates.....			.0
21. Receivables from parent, subsidiaries and affiliates.....			.0
22. Health care and other amounts receivable.....			.0
23. Aggregate write-ins for other than invested assets.....	.0	.0	.0
24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 10 through 23).....	.0	.0	.0
25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.0
26. TOTALS (Lines 24 and 25).....	.0	.0	.0

NONE

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
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.0	.0	.0
2301.....			.0
2302.....			.0
2303.....			.0
2398. Summary of remaining write-ins for Line 23 from overflow page.....	.0	.0	.0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	.0	.0	.0

NOTES TO FINANCIAL STATEMENTS

Note 1 - Summary of Significant Accounting Policies**A. Accounting practices**

The financial statements of American Medical Insurance Exchange (the Company) are presented on the basis of accounting practices prescribed or permitted by the Indiana Department of Insurance.

The Indiana Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the State of Indiana for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under the Indiana Insurance Code. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and procedures manual has been adopted as a component of prescribed or permitted practices by the State of Indiana.

The term "None" or "No significant change" is used in the following footnotes to indicate that the Company does not have any items requiring disclosure under the respective footnote.

B. Use of estimates

The preparation of financial statements in conformity with Statutory Accounting Principles (SAP) 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

The Company is not currently writing any new insurance policies, nor is it servicing any old insurance policies.

In addition, the Company used the following accounting policies:

- (1) Short-term investments are securities with an original maturity greater than 3 months but less than 1 year. Short-term investments are stated at amortized cost. Cash includes all short-term, highly liquid investments that are readily convertible to cash and were acquired with an original maturity of 3 months or less.
- (2) Bonds not backed by loans are stated at amortized cost. Premiums and discounts on bonds are amortized or accreted, respectively, over the life of the related debt security as an adjustment to yield using the scientific method. Interest income is recognized when it is earned.
- (3) The Company has no common stocks.
- (4) The Company has no preferred stocks.
- (5) The Company has no investment in mortgage loans.
- (6) The Company has no investment in loan-backed securities.
- (7) The Company has no subsidiaries.
- (8) The Company has no investments in joint ventures, partnerships, or limited liability companies.
- (9) The Company has no investment in derivatives.
- (10) The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, Property-Casualty Contracts – Premiums.
- (11) The Company has no unpaid losses or loss adjustment expenses.
- (12) The Company has made no change in the capitalization policy from the prior period.
- (13) The Company has no pharmaceutical rebate receivables.

Note 2 - Accounting Changes and Corrections of Errors

None

Note 3 - Business Combinations and Goodwill

None

Note 4 - Discontinued Operations

None

Note 5 - Investments

NOTES TO FINANCIAL STATEMENTS

The Company had no significant change in investments.

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

None

Note 7 - Investment Income

A. Accrued investment income

No significant change in accrued investment income

B. Amounts nonadmitted – None

Note 8 - Derivative Instruments

None

Note 9 - Income Taxes

A. Components of DTAs and DTLs and valuation allowance

Deferred Tax Assets (DTAs) and Deferred Tax Liabilities (DTLs) were not material since the Company is inactive and has no loss reserves and no unearned premiums.

B. Unrecognized DTLs

The Company had no unrecognized deferred tax liabilities at December 31, 2009.

C. Current tax and change in deferred tax

(1) Current tax expense or benefit

	<u>2009</u>	<u>2008</u>
Federal Income Tax	\$ (1,086)	\$ 362
Capital gains tax (benefit)	-	-
Federal income tax provision (benefit)	<u>\$ (1,086)</u>	<u>\$ 362</u>

(2) – None

D. Reconciliation of federal income tax rate to actual effective rate

The Company's income tax expense does not materially differ from the amounts obtained by applying the graduated federal tax rate of 15%.

E. Operating loss and tax credit carry forwards, and protective tax deposits

(1) Operating loss carryforwards – None

(1) The following is income tax expense that is available for recoupment in the event of future losses:

	Total
2009	\$ -
2008	\$ 362

(3) The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.

F. Consolidated federal income tax return

The Company does not file a consolidated Federal Income Tax return.

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

A. Nature of relationships

Effective January 2, 2009, the Company's ultimate parent, ProAssurance Corporation, purchased ProAssurance Mid-Continent Underwriters, Inc. (formerly Mid-Continent General Agency, Inc.). Prior to that date, Mid-Continent General Agency was an independent agency that has underwritten premiums for affiliated companies since 2007.

NOTES TO FINANCIAL STATEMENTS

Effective February 3, 2009, affiliate ProAssurance Casualty Company completed the purchase of Georgia Lawyers Insurance Company, and the subsequent merger of Georgia Lawyers Insurance Company into ProAssurance Casualty Company was completed on March 19, 2009.

Effective April 1, 2009, the Company's ultimate parent, ProAssurance Corporation, purchased Podiatry Insurance Company of America through an all cash sponsored demutualization, which was approved by the Illinois Department of Insurance and PICA policyholders.

Effective May 1, 2009, affiliate American Captive Corporation was merged into affiliate ProAssurance National Capital Insurance Company. American Captive Corporation was an inactive affiliate domiciled in the District of Columbia.

Effective May 19, 2009, affiliate NCRIC Corporation was merged into affiliate PRA Professional Liability Group, Inc.

Effective June 15, 2009, affiliate PSA of Wisconsin, Inc. and PMC of Wisconsin, Inc. were merged into affiliate Professional Service Network, Inc.

Effective June 30, 2009, affiliate Professional Service Network, Inc. was merged into affiliate PRA Group Holdings, Inc.

Effective July 31, 2009, affiliate Physicians Protective Plan, Inc. was merged into affiliate IAO, Inc.

Effective August 15, 2009, affiliate E-Health Solutions was sold.

Effective August 31, 2009, affiliate NCRIC Insurance Agency, Inc., National Capital Insurance Brokerage, Ltd. and ProNational Insurance Agency, Inc. were merged into affiliate IAO, Inc.

Effective September 30, 2009, affiliates Medical Assurance Agency of Indiana, Inc. and Mutual Assurance Agency of Ohio, Inc. were merged into affiliate IAO, Inc.

B through E – None

F. Management, service contracts, cost sharing arrangements

Effective August 1, 2009, the Company and its affiliates amended its Expense Allocation and Management Services Agreements primarily to include a new affiliate, PRA Group Holdings, Inc. and reflect recent company mergers or dispositions.

G through L – None

Note 11 - Debt

None

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

None

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

A. Outstanding shares - American Insurance Management Corporation is the attorney-in-fact for the Company. There are no shares issued or outstanding of American Medical Insurance Exchange.

B. Dividend rate of preferred stock – None

C. Dividend restrictions

The maximum amount of dividends, which can be paid by State of Indiana insurance companies to shareholders without prior approval of the Insurance Commissioner, is 10% of earned surplus. Dividends are non-cumulative and are paid as determined by the Board of Directors.

D. Dates and amounts of dividends paid – None

E. Amount of ordinary dividends that may be paid - There were no restrictions placed on the Company's surplus.

F through M – None

Note 14 - Contingencies

None

Note 15 - Leases

None

NOTES TO FINANCIAL STATEMENTS

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

None

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

None

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

None

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

None

Note 20 - Other Items

None

Note 21 - Events Subsequent

None

Note 22 - Reinsurance

None

Note 23 - Retrospectively Rated Contracts & Contracts Subject to Redetermination

None

Note 24 - Change in Incurred Losses and Loss Adjustment Expenses

None

Note 25 - Intercompany Pooling Arrangements

None

Note 26 - Structured Settlements

None

Note 27 - Health Care Receivables

None

Note 28 - Participating Policies

None

Note 29 - Premium Deficiency Reserves

None

Note 30 - High Deductibles

None

NOTES TO FINANCIAL STATEMENTS

Note 31 - Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

None

Note 32 - Asbestos/Environmental Reserves

None

Note 33 - Subscriber Savings Accounts

None

Note 34 - Multiple Peril Crop Insurance

None

Note 35 - Financial Guaranty Insurance

None

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? Yes [X] No []
- 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 and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State regulating? INDIANA

- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change: N/A

- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2004
- 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. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2004
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 08/09/2006

- 3.4 By what department or departments? INDIANA DEPARTMENT OF INSURANCE
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments? Yes [] No [] N/A [X]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]

- 4.1 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 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]
- 4.22 renewals? Yes [] No [X]

- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] 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 Name of Entity	2 NAIC Co. Code	3 State of Domicile

- 6.1 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? Yes [] No [X]
- 6.2 If yes, give full information:

- 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 Nationality	2 Type of Entity

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

- 8.4 If response to 8.3 is yes, please provide 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 Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 OTS	6 FDIC	7 SEC

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
N/A. NOT REQUIRED AS PERMITTED BY THE INDIANA DEPARTMENT OF INSURANCE.

10. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
N/A. NOT REQUIRED AS PERMITTED BY THE INDIANA DEPARTMENT OF INSURANCE.

- 11.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
- 11.11 Name of real estate holding company

- 11.12 Number of parcels involved
- 11.13 Total book/adjusted carrying value

- 11.2 If yes, provide explanation.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

12. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 12.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
-
- 12.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
- 12.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
- 12.4 If answer to (12.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []
-
- 13.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 - b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 - c. Compliance with applicable governmental laws, rules and regulations;
 - d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 - e. Accountability for adherence to the code.
- 13.11 If the response to 13.1 is No, please explain:
-
- 13.2 Has the code of ethics for senior managers been amended? Yes [X] No []
- 13.21 If the response to 13.2 is Yes, provide information related to amendment(s).
NON-SUBSTANTIVE TECHNICAL CHANGES.
-
- 13.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 13.31 If the response to 13.3 is yes, provide the nature of any waiver(s).
-

BOARD OF DIRECTORS

14. Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinate committee thereof? Yes [X] No []
15. Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof? Yes [X] No []
16. Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [X] No []

FINANCIAL

17. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 18.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 18.11 To directors or other officers \$.....0
 - 18.12 To stockholders not officers \$.....0
 - 18.13 Trustees, supreme or grand (Fraternal only) \$.....0
- 18.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 18.21 To directors or other officers \$.....0
 - 18.22 To stockholders not officers \$.....0
 - 18.23 Trustees, supreme or grand (Fraternal only) \$.....0
- 19.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]
- 19.2 If yes, state the amount thereof at December 31 of the current year:
- 19.21 Rented from others
 - 19.22 Borrowed from others
 - 19.23 Leased from others
 - 19.24 Other
- 20.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 20.2 If answer is yes:
- 20.21 Amount paid as losses or risk adjustment
 - 20.22 Amount paid as expenses
 - 20.23 Other amounts paid
- 21.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
- 21.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount.

INVESTMENT

- 22.1 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 22.3)? Yes [X] No []
- 22.2 If no, give full and complete information relating thereto.
-
- 22.3 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 16 where this information is also provided).
-
- 22.4 Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [] No [] N/A [X]
- 22.5 If answer to 22.4 is yes, report amount of collateral.
- 22.6 If answer to 22.4 is no, report amount of collateral.
- 23.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 19.1 and 22.3) Yes [X] No []

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

- 23.2 If yes, state the amount thereof at December 31 of the current year:
- | | |
|--|----------------|
| 23.21 Subject to repurchase agreements | \$.....0 |
| 23.22 Subject to reverse repurchase agreements | \$.....0 |
| 23.23 Subject to dollar repurchase agreements | \$.....0 |
| 23.24 Subject to reverse dollar repurchase agreements | \$.....0 |
| 23.25 Pledged as collateral | \$.....0 |
| 23.26 Placed under option agreements | \$.....0 |
| 23.27 Letter stock or securities restricted as to sale | \$.....0 |
| 23.28 On deposit with state or other regulatory body | \$.....101,841 |
| 23.29 Other | \$.....0 |

23.3 For category (23.27) provide the following:

1 Nature of Restriction	2 Description	3 Amount

- 24.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]
- 24.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
If no, attach a description with this statement.

- 25.1 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? Yes [] No [X]
- 25.2 If yes, state the amount thereof at December 31 of the current year:

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

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

1 Name of Custodian(s)	2 Custodian's Address
US BANK	BIRMINGHAM, AL

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

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
NONE		

26.03 Have there been any changes, including name changes, in the custodian(s) identified in 26.01 during the current year? Yes [] No [X]

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

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

26.05 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository Number(s)	2 Name	3 Address

27.1 Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [] No [X]

27.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adj. Carrying Value
27.2999. TOTAL		0

27.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from the above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to Holding	4 Date of Valuation

28. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
28.1 Bonds.....	107,421	109,060	1,639
28.2 Preferred stocks.....			0
28.3 Totals.....	107,421	109,060	1,639

28.4 Describe the sources or methods utilized in determining the fair values:

REFERENCE TO SVO AND / OR IDC SERVICE AND INVESTMENT MANAGERS.

- 29.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [] No [X]
- 29.2 If yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [] No []
- 29.3 If no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D.

30.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes [X] No []

30.2 If no, list exceptions:

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

OTHER

31.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$.....0

31.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid

32.1 Amount of payments for legal expenses, if any? \$.....0

32.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid

33.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$.....0

33.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [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 Supplement Insurance Experience Exhibit?
- 1.31 Reason for excluding:

- 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.
- 1.5 Indicate total incurred claims on all Medicare Supplement insurance.
- 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
 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:
 1.74 Total premium earned
 1.75 Total incurred claims
 1.76 Number of covered lives

2. Health test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator.....	\$.....0	\$.....0
2.2 Premium Denominator.....	\$.....0	\$.....0
2.3 Premium Ratio (2.1/2.2).....	.....0.0	.....0.0
2.4 Reserve Numerator.....	\$.....0	\$.....0
2.5 Reserve Denominator.....	\$.....0	\$.....0
2.6 Reserve Ratio (2.4/2.5).....	.....0.0	.....0.0

- 3.1 Does the reporting entity issue both participating and non-participating policies? Yes [] No [X]
- 3.2 If yes, state the amount of calendar year premiums written on:
 3.21 Participating policies
 3.22 Non-participating policies

4. FOR MUTUAL REPORTING ENTITIES AND RECIPROCAL EXCHANGES ONLY:

- 4.1 Does the reporting entity issue assessable policies? Yes [] No [X]
- 4.2 Does the reporting entity issue non-assessable policies? Yes [] No [X]
- 4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders?%
- 4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.

5. FOR RECIPROCAL EXCHANGES ONLY:

- 5.1 Does the exchange appoint local agents? Yes [] No [X]
- 5.2 If yes, is the commission paid:
 5.21 Out of Attorney's-in-fact compensation Yes [] No [] N/A []
 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 compensation of the Attorney-in-fact?
NONE.

- 5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No [X]
- 5.5 If yes, give full information:

- 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?
NONE.

- 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 those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:
NOT APPLICABLE.

- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
NOT APPLICABLE.

- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes [] No [X]

- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss:
THE COMPANY DOES NOT CURRENTLY WRITE BUSINESS.

- 7.1 Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)? Yes [] No [X]

- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions.
- 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes [] No []

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? Yes [] No [X]
- 8.2 If yes, give full information:

- 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:
 (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
 (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;
 (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 affiliate 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 achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 32 of SSAP No. 62, 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
 (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [] No [X]
- 9.5 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.
- 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 [X] No []
 (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]
- 11.1 Has this reporting entity guaranteed policies issued by any other reporting entity and now in force? Yes [] No [X]
- 11.2 If yes, give full information:

- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 13.3 of the assets schedule, Page 2, state the amount of corresponding liabilities recorded for:
 12.11 Unpaid losses \$.....0
 12.12 Unpaid underwriting expenses (including loss adjustment expenses) \$.....0
- 12.2 Of the amount on Line 13.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds: \$.....0
- 12.3 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 [] 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%
- 12.5 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? Yes [] No [X]
- 12.6 If yes, state the amount thereof at December 31 of current year:
 12.61 Letters of credit
 12.62 Collateral and other funds
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$.....0
- 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [] No [X]
- 13.3 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.0

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [] No [X]

14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [] No []

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [] No []

14.5 If the answer to 14.4 is no, please explain:

15.1 Has the reporting entity guaranteed any financial premium accounts? Yes [] No [X]

15.2 If yes, give full information:

16.1 Does the reporting entity write any warranty business? Yes [] No [X]

If yes, disclose the following information for each of the following types of warranty coverage:

	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.....
16.14 Other*.....

* Disclose type of coverage: _____

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F-Part 3 that it excludes from Schedule F-Part 5? Yes [] No [X]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F-Part 5.

Provide the following information for this exemption:

- 17.11 Gross amount of unauthorized reinsurance in Schedule F-Part 3 excluded from Schedule F-Part 5
- 17.12 Unfunded portion of Interrogatory 17.11
- 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11
- 17.14 Case reserves portion of Interrogatory 17.11
- 17.15 Incurred but not reported portion of Interrogatory 17.11
- 17.16 Unearned premium portion of Interrogatory 17.11
- 17.17 Contingent commission portion of Interrogatory 17.11

Provide the following information for all other amounts included in Schedule F-Part 3 and excluded from Schedule F-Part 5, not included above:

- 17.18 Gross amount of unauthorized reinsurance in Schedule F-Part 3 excluded from Schedule F-Part 5
- 17.19 Unfunded portion of Interrogatory 17.18
- 17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18
- 17.21 Case reserves portion of Interrogatory 17.18
- 17.22 Incurred but not reported portion of Interrogatory 17.18
- 17.23 Unearned premium portion of Interrogatory 17.18
- 17.24 Contingent commission portion of Interrogatory 17.18

18.1 Do you act as a custodian for health savings account? Yes [] No [X]

18.2 If yes, please provide the amount of custodial funds held as of the reporting date.

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

18.4 If yes, please provide the balance of the funds administered as of the reporting date.

FIVE-YEAR HISTORICAL DATA

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

	1 2009	2 2008	3 2007	4 2006	5 2005
Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. 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).....					
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).....	0	0	0	0	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).....					
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).....	0	0	0	0	0
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8).....	(10,199)	(11,610)	(8,667)	(3,620)	(2,533)
14. Net investment gain (loss) (Line 11).....	2,713	14,275	28,926	24,849	11,451
15. Total other income (Line 15).....			3	(2)	4
16. Dividends to policyholders (Line 17).....					
17. Federal and foreign income taxes incurred (Line 19).....	(1,086)	362	3,065	3,184	795
18. Net income (Line 20).....	(6,400)	2,303	17,197	18,043	8,127
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 24, Col. 3).....	576,095	577,471	569,727	554,745	535,511
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 13.1).....					
20.2 Deferred and not yet due (Line 13.2).....					
20.3 Accrued retrospective premiums (Line 13.3).....					
21. Total liabilities excluding protected cell business (Page 3, Line 24).....	10,523	5,499	58	2,272	1,081
22. Losses (Page 3, Line 1).....					
23. Loss adjustment expenses (Page 3, Line 3).....					
24. Unearned premiums (Page 3, Line 9).....					
25. Capital paid up (Page 3, Lines 28 & 29).....					
26. Surplus as regards policyholders (Page 3, Line 35).....	565,572	571,972	569,669	552,473	534,430
Cash Flow (Page 5)					
27. Net cash from operations (Line 11).....	2,276	6,888	15,513	20,781	9,682
Risk-Based Capital Analysis					
28. Total adjusted capital.....	565,572	571,972	569,669	552,473	534,430
29. Authorized control level risk-based capital.....	552	2,270	600	83	1,624
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Item divided by Page 2, Line 10, Col. 3) x 100.0					
30. Bonds (Line 1).....	17.7	18.1	17.6	18.2	18.7
31. Stocks (Lines 2.1 & 2.2).....					
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).....	82.3	81.9	82.4	81.8	81.3
35. Contract loans (Line 6).....					
36. Other invested assets (Line 7).....					
37. Receivable for securities (Line 8).....					
38. Aggregate write-ins for invested assets (Line 9).....					
39. Cash, cash equivalents and invested assets (Line 10).....	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
40. Affiliated bonds (Sch. D, Summary, Line 12, Col. 1).....					
41. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1).....					
42. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1).....					
43. Affiliated short-term investments (Schedule DA, Verification, Col. 5, Line 10).....					
44. Affiliated mortgage loans on real estate.....					
45. All other affiliated.....					
46. Total of above lines 40 to 45.....	0	0	0	0	0
47. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 46 above divided by Page 3, Col. 1, Line 35 x 100.0).....	0.0				

Annual Statement for the year 2009 of the **AMERICAN MEDICAL INSURANCE EXCHANGE**
FIVE-YEAR HISTORICAL DATA

(Continued)

	1	2	3	4	5
	2009	2008	2007	2006	2005
Capital and Surplus Accounts (Page 4)					
48. Net unrealized capital gains (losses) (Line 24).....					
49. Dividends to stockholders (Line 35).....					
50. Change in surplus as regards policyholders for the year (Line 38).....	(6,400)	2,303	17,197	18,043	8,127
Gross Losses Paid (Page 9, Part 2, Cols. 1&2)					
51. 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).....					
52. Property lines (Lines 1, 2, 9, 12, 21 & 26).....					
53. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....					
54. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....					
55. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
56. Total (Line 35).....	.0	.0	.0	.0	.0
Net Losses Paid (Page 9, Part 2, Col. 4)					
57. 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).....					
58. Property lines (Lines 1, 2, 9, 12, 21 & 26).....					
59. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....					
60. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....					
61. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
62. Total (Line 35).....	.0	.0	.0	.0	.0
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
63. Premiums earned (Line 1).....	100.0	100.0	100.0	100.0	100.0
64. Losses incurred (Line 2).....					
65. Loss expenses incurred (Line 3).....					
66. Other underwriting expenses incurred (Line 4).....					
67. Net underwriting gain (loss) (Line 8).....					
Other Percentages					
68. 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).....					
69. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0).....					
70. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 35, Col. 1 x 100.0).....					
One Year Loss Development (000 omitted)					
71. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11).....					
72. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 71 above divided by Page 4, Line 21, Col. 1 x 100).....					
Two Year Loss Development (000 omitted)					
73. 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).....					
74. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 73 above divided by Page 4, Line 21, Col. 2 x 100.0).....					

NOTE: 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:

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....2698 NAIC Company Code....31402

BUSINESS IN GRAND TOTAL DURING THE YEAR

19.GT

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												6,580
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A & H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A & H (b).....												
15.3 Guaranteed renewable A & H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A & H (b).....												
15.8 Federal employees health benefits program premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....												
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....												
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	6,580

DETAILS OF WRITE-INS

3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code.....2698 NAIC Company Code....31402

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

19 IN

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	6,580
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A & H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A & H (b).....												
15.3 Guaranteed renewable A & H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A & H (b).....												
15.8 Federal employees health benefits program premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....												
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....												
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	6,580

DETAILS OF WRITE-INS

3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

Sch. F-Pt. 1
NONE

Sch. F-Pt. 2
NONE

Sch. F-Pt. 3
NONE

Sch. F-Pt. 4
NONE

Sch. F-Pt. 5
NONE

Sch. F-Pt. 6
NONE

Sch. F-Pt. 7
NONE

SCHEDULE F - PART 8

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 10).....	574,218		574,218
2. Premiums and considerations (Line 13).....			0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 14.1).....			0
4. Funds held by or deposited with reinsured companies (Line 14.2).....			0
5. Other assets.....	1,877		1,877
6. Net amount recoverable from reinsurers.....			0
7. Protected cell assets (Line 25).....			0
8. Totals (Line 26).....	576,095	0	576,095
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....			0
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	10,523		10,523
11. Unearned premiums (Line 9).....			0
12. Advance premiums (Line 10).....			0
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....			0
15. Funds held by company under reinsurance treaties (Line 13).....			0
16. Amounts withheld or retained by company for account of others (Line 14).....			0
17. Provision for reinsurance (Line 16).....			0
18. Other liabilities.....			0
19. Total liabilities excluding protected cell business (Line 24).....	10,523	0	10,523
20. Protected cell liabilities (Line 25).....			0
21. Surplus as regards policyholders (Line 35).....	565,572	XXX	565,572
22. Totals (Line 36).....	576,095	0	576,095

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?..Yes [] No [X]

If yes, give full explanation:

**Sch. H-Pt. 1
NONE**

**Sch. H-Pt. 2
NONE**

**Sch. H-Pt. 3
NONE**

**Sch. H-Pt. 4
NONE**

**Sch. H-Pt. 5
NONE**

**Sch. P-Pt. 1-Summary
NONE**

**Sch. P-Pt. 2-Summary
NONE**

**Sch. P-Pt. 3-Summary
NONE**

**Sch. P-Pt. 4-Summary
NONE**

**Sch. P-Pt. 1A
NONE**

**Sch. P-Pt. 1B
NONE**

**Sch. P-Pt. 1C
NONE**

**Sch. P-Pt. 1D
NONE**

**Sch. P-Pt. 1E
NONE**

**Sch. P-Pt. 1F-Sn. 1
NONE**

**Sch. P-Pt. 1F-Sn. 2
NONE**

**Sch. P-Pt. 1G
NONE**

**Sch. P-Pt. 1H-Sn. 1
NONE**

**Sch. P-Pt. 1H-Sn. 2
NONE**

**Sch. P-Pt. 1I
NONE**

**Sch. P-Pt. 1J
NONE**

**Sch. P-Pt. 1K
NONE**

**Sch. P-Pt. 1L
NONE**

**Sch. P-Pt. 1M
NONE**

**Sch. P-Pt. 1N
NONE**

**Sch. P-Pt. 1O
NONE**

**Sch. P-Pt. 1P
NONE**

**Sch. P-Pt. 1R-Sn. 1
NONE**

**Sch. P-Pt. 1R-Sn. 2
NONE**

**Sch. P-Pt. 1S
NONE**

**Sch. P-Pt. 1T
NONE**

**Sch. P-Pt. 2A
NONE**

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

**Sch. P-Pt. 2C
NONE**

**Sch. P-Pt. 2D
NONE**

**Sch. P-Pt. 2E
NONE**

**Sch. P-Pt. 2F-Sn. 1
NONE**

**Sch. P-Pt. 2F-Sn. 2
NONE**

**Sch. P-Pt. 2G
NONE**

**Sch. P-Pt. 2H-Sn. 1
NONE**

**Sch. P-Pt. 2H-Sn. 2
NONE**

**Sch. P-Pt. 2I
NONE**

**Sch. P-Pt. 2J
NONE**

**Sch. P-Pt. 2K
NONE**

**Sch. P-Pt. 2L
NONE**

**Sch. P-Pt. 2M
NONE**

**Sch. P-Pt. 2N
NONE**

**Sch. P-Pt. 2O
NONE**

**Sch. P-Pt. 2P
NONE**

**Sch. P-Pt. 2R-Sn. 1
NONE**

**Sch. P-Pt. 2R-Sn. 2
NONE**

**Sch. P-Pt. 2S
NONE**

**Sch. P-Pt. 2T
NONE**

**Sch. P-Pt. 3A
NONE**

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

**Sch. P-Pt. 3C
NONE**

**Sch. P-Pt. 3D
NONE**

**Sch. P-Pt. 3E
NONE**

**Sch. P-Pt. 3F-Sn. 1
NONE**

**Sch. P-Pt. 3F-Sn. 2
NONE**

**Sch. P-Pt. 3G
NONE**

**Sch. P-Pt. 3H-Sn. 1
NONE**

**Sch. P-Pt. 3H-Sn. 2
NONE**

**Sch. P-Pt. 3I
NONE**

**Sch. P-Pt. 3J
NONE**

**Sch. P-Pt. 3K
NONE**

**Sch. P-Pt. 3L
NONE**

**Sch. P-Pt. 3M
NONE**

**Sch. P-Pt. 3N
NONE**

**Sch. P-Pt. 3O
NONE**

**Sch. P-Pt. 3P
NONE**

**Sch. P-Pt. 3R-Sn. 1
NONE**

**Sch. P-Pt. 3R-Sn. 2
NONE**

**Sch. P-Pt. 3S
NONE**

**Sch. P-Pt. 3T
NONE**

**Sch. P-Pt. 4A
NONE**

**Sch. P-Pt. 4B
NONE**

**Sch. P-Pt. 4C
NONE**

**Sch. P-Pt. 4D
NONE**

**Sch. P-Pt. 4E
NONE**

**Sch. P-Pt. 4F-Sn. 1
NONE**

**Sch. P-Pt. 4F-Sn. 2
NONE**

**Sch. P-Pt. 4G
NONE**

**Sch. P-Pt. 4H-Sn. 1
NONE**

**Sch. P-Pt. 4H-Sn. 2
NONE**

**Sch. P-Pt. 4I
NONE**

**Sch. P-Pt. 4J
NONE**

**Sch. P-Pt. 4K
NONE**

**Sch. P-Pt. 4L
NONE**

**Sch. P-Pt. 4M
NONE**

**Sch. P-Pt. 4N
NONE**

**Sch. P-Pt. 4O
NONE**

**Sch. P-Pt. 4P
NONE**

**Sch. P-Pt. 4R-Sn. 1
NONE**

**Sch. P-Pt. 4R-Sn. 2
NONE**

**Sch. P-Pt. 4S
NONE**

**Sch. P-Pt. 4T
NONE**

**Sch. P-Pt. 5A-Sn. 1
NONE**

**Sch. P-Pt. 5A-Sn. 2
NONE**

**Sch. P-Pt. 5A-Sn. 3
NONE**

**Sch. P-Pt. 5B-Sn. 1
NONE**

**Sch. P-Pt. 5B-Sn. 2
NONE**

**Sch. P-Pt. 5B-Sn. 3
NONE**

**Sch. P-Pt. 5C-Sn. 1
NONE**

**Sch. P-Pt. 5C-Sn. 2
NONE**

**Sch. P-Pt. 5C-Sn. 3
NONE**

**Sch. P-Pt. 5D-Sn. 1
NONE**

**Sch. P-Pt. 5D-Sn. 2
NONE**

**Sch. P-Pt. 5D-Sn. 3
NONE**

**Sch. P-Pt. 5E-Sn. 1
NONE**

**Sch. P-Pt. 5E-Sn. 2
NONE**

**Sch. P-Pt. 5E-Sn. 3
NONE**

**Sch. P-Pt. 5F-Sn. 1A
NONE**

**Sch. P-Pt. 5F-Sn. 2A
NONE**

**Sch. P-Pt. 5F-Sn. 3A
NONE**

**Sch. P-Pt. 5F-Sn. 1B
NONE**

**Sch. P-Pt. 5F-Sn. 2B
NONE**

**Sch. P-Pt. 5F-Sn. 3B
NONE**

**Sch. P-Pt. 5H-Sn. 1A
NONE**

**Sch. P-Pt. 5H-Sn. 2A
NONE**

**Sch. P-Pt. 5H-Sn. 3A
NONE**

**Sch. P-Pt. 5H-Sn. 1B
NONE**

**Sch. P-Pt. 5H-Sn. 2B
NONE**

**Sch. P-Pt. 5H-Sn. 3B
NONE**

**Sch. P-Pt. 5R-Sn. 1A
NONE**

**Sch. P-Pt. 5R-Sn. 2A
NONE**

**Sch. P-Pt. 5R-Sn. 3A
NONE**

**Sch. P-Pt. 5R-Sn. 1B
NONE**

**Sch. P-Pt. 5R-Sn. 2B
NONE**

**Sch. P-Pt. 5R-Sn. 3B
NONE**

**Sch. P-Pt. 5T-Sn. 1
NONE**

**Sch. P-Pt. 5T-Sn. 2
NONE**

**Sch. P-Pt. 5T-Sn. 3
NONE**

**Sch. P-Pt. 6C-Sn. 1
NONE**

**Sch. P-Pt. 6C-Sn. 2
NONE**

**Sch. P-Pt. 6D-Sn. 1
NONE**

**Sch. P-Pt. 6D-Sn. 2
NONE**

**Sch. P-Pt. 6E-Sn. 1
NONE**

**Sch. P-Pt. 6E-Sn. 2
NONE**

**Sch. P-Pt. 6H-Sn. 1A
NONE**

**Sch. P-Pt. 6H-Sn. 2A
NONE**

**Sch. P-Pt. 6H-Sn. 1B
NONE**

**Sch. P-Pt. 6H-Sn. 2B
NONE**

**Sch. P-Pt. 6M-Sn. 1
NONE**

**Sch. P-Pt. 6M-Sn. 2
NONE**

**Sch. P-Pt. 6N-Sn. 1
NONE**

**Sch. P-Pt. 6N-Sn. 2
NONE**

**Sch. P-Pt. 6O-Sn. 1
NONE**

**Sch. P-Pt. 6O-Sn. 2
NONE**

**Sch. P-Pt. 6R-Sn. 1A
NONE**

**Sch. P-Pt. 6R-Sn. 2A
NONE**

**Sch. P-Pt. 6R-Sn. 1B
NONE**

**Sch. P-Pt. 6R-Sn. 2B
NONE**

**Sch. P-Pt. 7A-Sn. 1
NONE**

**Sch. P-Pt. 7A-Sn. 2
NONE**

**Sch. P-Pt. 7A-Sn. 3
NONE**

**Sch. P-Pt. 7A-Sn. 4
NONE**

**Sch. P-Pt. 7A-Sn. 5
NONE**

**Sch. P-Pt. 7B-Sn. 1
NONE**

**Sch. P-Pt. 7B-Sn. 2
NONE**

**Sch. P-Pt. 7B-Sn. 3
NONE**

**Sch. P-Pt. 7B-Sn. 4
NONE**

**Sch. P-Pt. 7B-Sn. 5
NONE**

**Sch. P-Pt. 7B-Sn. 6
NONE**

**Sch. P-Pt. 7B-Sn. 7
NONE**

Annual Statement for the year 2009 of the **AMERICAN MEDICAL INSURANCE EXCHANGE**
SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims-Made insurance policies. EREs provided for reasons other than DDR are not be included.
- 1.1 Does the company issue Medical Professional Liability Claims-Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions.
- 1.2 What is the total amount of the reserve for that provision (DDR reserve) as reported, explicitly or not, elsewhere in this statement (in dollars)?
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A[X]
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1	2
	Section 1: Occurrence	Section 2: Claims-Made
1.601 Prior.....
1.602 2000.....
1.603 2001.....
1.603 2002.....
1.605 2003.....
1.606 2004.....
1.607 2005.....
1.608 2006.....
1.609 2007.....
1.610 2008.....
1.611 2009.....
1.612 Totals.....	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this statement? Yes [X] No []
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]
 If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.
 Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
 Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5. What were the net premiums in force at the end of the year for: (in thousands of dollars)
 5.1 Fidelity
 5.2 Surety
6. Claim count information is reported per claim or per claimant. (Indicate which). PER CLAIM
 If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]
- 7.2 An extended statement may be attached.

AMERICAN MEDICAL INSURANCE EXCHANGE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Incl. in Col. 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama.....AL	N								
2. Alaska.....AK	N								
3. Arizona.....AZ	N								
4. Arkansas.....AR	N								
5. California.....CA	N								
6. Colorado.....CO	N								
7. Connecticut.....CT	N								
8. Delaware.....DE	N								
9. District of Columbia.....DC	N								
10. Florida.....FL	N								
11. Georgia.....GA	N								
12. Hawaii.....HI	N								
13. Idaho.....ID	N								
14. Illinois.....IL	N								
15. Indiana.....IN	L	0	0	0	0	0	0		
16. Iowa.....IA	N								
17. Kansas.....KS	N								
18. Kentucky.....KY	N								
19. Louisiana.....LA	N								
20. Maine.....ME	N								
21. Maryland.....MD	N								
22. Massachusetts.....MA	N								
23. Michigan.....MI	N								
24. Minnesota.....MN	N								
25. Mississippi.....MS	N								
26. Missouri.....MO	N								
27. Montana.....MT	N								
28. Nebraska.....NE	N								
29. Nevada.....NV	N								
30. New Hampshire.....NH	N								
31. New Jersey.....NJ	N								
32. New Mexico.....NM	N								
33. New York.....NY	N								
34. North Carolina.....NC	N								
35. North Dakota.....ND	N								
36. Ohio.....OH	N								
37. Oklahoma.....OK	N								
38. Oregon.....OR	N								
39. Pennsylvania.....PA	N								
40. Rhode Island.....RI	N								
41. South Carolina.....SC	N								
42. South Dakota.....SD	N								
43. Tennessee.....TN	N								
44. Texas.....TX	N								
45. Utah.....UT	N								
46. Vermont.....VT	N								
47. Virginia.....VA	N								
48. Washington.....WA	N								
49. West Virginia.....WV	N								
50. Wisconsin.....WI	N								
51. Wyoming.....WY	N								
52. American Samoa.....AS	N								
53. Guam.....GU	N								
54. Puerto Rico.....PR	N								
55. US Virgin Islands.....VI	N								
56. Northern Mariana Islands.....MP	N								
57. Canada.....CN	N								
58. Aggregate Other Alien.....OT	XXX	0	0	0	0	0	0	0	0
59. Totals.....	(a).....1	0	0	0	0	0	0	0	0

DETAILS OF WRITE-INS

5801.....	XXX								
5802.....	XXX								
5803.....	XXX								
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
5899. Totals (Lines 5801 thru 5803+ Line 5898) (Line 58 above)	XXX	0	0	0	0	0	0	0	0

(a) Insert the number of "L" responses except for Canada and Other Alien.
Explanation of Basis of Allocation of Premiums by States, etc.

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

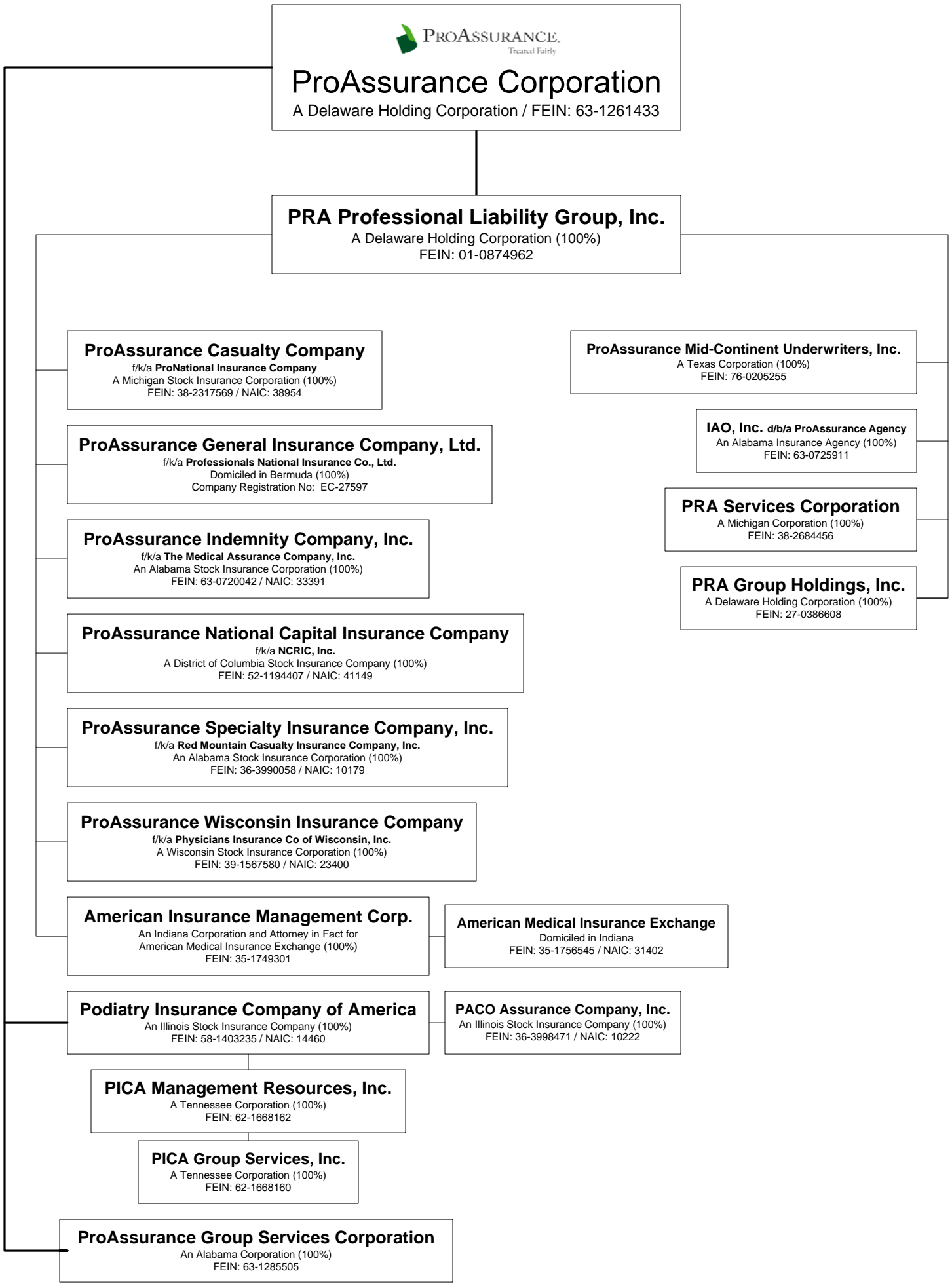
Allocated by States and Territories

States, Etc.		Direct Business Only					6 Totals
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama.....	AL						0
2. Alaska.....	AK						0
3. Arizona.....	AZ						0
4. Arkansas.....	AR						0
5. California.....	CA						0
6. Colorado.....	CO						0
7. Connecticut.....	CT						0
8. Delaware.....	DE						0
9. District of Columbia.....	DC						0
10. Florida.....	FL						0
11. Georgia.....	GA						0
12. Hawaii.....	HI						0
13. Idaho.....	ID						0
14. Illinois.....	IL						0
15. Indiana.....	IN						0
16. Iowa.....	IA						0
17. Kansas.....	KS						0
18. Kentucky.....	KY						0
19. Louisiana.....	LA						0
20. Maine.....	ME						0
21. Maryland.....	MD						0
22. Massachusetts.....	MA						0
23. Michigan.....	MI						0
24. Minnesota.....	MN						0
25. Mississippi.....	MS						0
26. Missouri.....	MO						0
27. Montana.....	MT						0
28. Nebraska.....	NE						0
29. Nevada.....	NV						0
30. New Hampshire.....	NH						0
31. New Jersey.....	NJ						0
32. New Mexico.....	NM						0
33. New York.....	NY						0
34. North Carolina.....	NC						0
35. North Dakota.....	ND						0
36. Ohio.....	OH						0
37. Oklahoma.....	OK						0
38. Oregon.....	OR						0
39. Pennsylvania.....	PA						0
40. Rhode Island.....	RI						0
41. South Carolina.....	SC						0
42. South Dakota.....	SD						0
43. Tennessee.....	TN						0
44. Texas.....	TX						0
45. Utah.....	UT						0
46. Vermont.....	VT						0
47. Virginia.....	VA						0
48. Washington.....	WA						0
49. West Virginia.....	WV						0
50. Wisconsin.....	WI						0
51. Wyoming.....	WY						0
52. American Samoa.....	AS						0
53. Guam.....	GU						0
54. Puerto Rico.....	PR						0
55. US Virgin Islands.....	VI						0
56. Northern Mariana Islands.....	MP						0
57. Canada.....	CN						0
58. Aggregate Other Alien.....	OT						0
59. Totals.....		0	0	0	0	0	0

NONE

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART



SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
33391	63-0720042	ProAssurance Indemnity Company, Inc.	(125,000,000)				(82,920,156)				(207,920,156)	3,603,000
	63-0725911	IAO, Inc.	(500,000)				(689,710)				(1,189,710)	
	76-0205255	ProAssurance Mid-Continent Underwriters, Inc.					(3,150,998)				(3,150,998)	
	01-0874962	PRA Professional Liability Group, Inc.	(2,000,000)								(2,000,000)	
	63-1285505	ProAssurance Group Services Corporation					63,716,195				63,716,195	
	63-1261433	ProAssurance Corporation	221,500,000	(20,000,000)			71,235,250				272,735,250	
	52-2134774	NCRIC Corporation	(30,000,000)	(500,000)							(30,500,000)	
41149	52-1194407	ProAssurance National Capital Insurance Company	(39,000,000)	5,500,000			91,287				(33,408,713)	
14460	58-1403235	Podiatry Insurance Company of America		15,000,000			(17,456,894)				(2,456,894)	(8,082,226)
10222	36-3998471	PACO Assurance Company, Inc.					(3,085,398)				(3,085,398)	7,748,202
	62-1668162	PICA Managment Resources, Inc.					20,268,360				20,268,360	
	62-1668160	PICA Group Services, Inc.					321,198				321,198	
23400	39-1567580	ProAssurance Wisconsin Insurance Company					(8,602,534)				(8,602,534)	
38954	38-2317569	ProAssurance Casualty Company	(25,000,000)		(14,208,065)		(37,981,560)				(77,189,625)	(14,173,000)
10179	36-3990058	ProAssurance Specialty Insurance Company, Inc.			14,208,065		(1,745,040)				12,463,025	14,965,024
	98-0406198	ProAssurance General Insurance Company, Ltd.									0	(4,061,000)
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

**Overflow Page
NONE**

**Overflow Page
NONE**

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement	
	1 Amount	2 Percentage	3 Amount	4 Percentage
1. Bonds:				
1.1 U.S. treasury securities.....	101,841	17.7	101,841	17.7
1.2 U.S. government agency obligations (excluding mortgage-backed securities):				
1.21 Issued by U.S. government agencies.....		0.0		0.0
1.22 Issued by U.S. government sponsored agencies.....		0.0		0.0
1.3 Non-U.S. government (including Canada, excluding mortgage-backed securities).....		0.0		0.0
1.4 Securities issued by states, territories and possessions and political subdivisions in the U.S.:				
1.41 States, territories and possessions general obligations.....		0.0		0.0
1.42 Political subdivisions of states, territories & possessions & political subdivisions general obligations.....		0.0		0.0
1.43 Revenue and assessment obligations.....		0.0		0.0
1.44 Industrial development and similar obligations.....		0.0		0.0
1.5 Mortgage-backed securities (includes residential and commercial MBS):				
1.51 Pass-through securities:				
1.511 Issued or guaranteed by GNMA.....		0.0		0.0
1.512 Issued or guaranteed by FNMA and FHLMC.....		0.0		0.0
1.513 All other.....		0.0		0.0
1.52 CMOs and REMICs:				
1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA.....		0.0		0.0
1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-backed securities issued or guaranteed by agencies shown in Line 1.521.....		0.0		0.0
1.523 All other.....		0.0		0.0
2. Other debt and other fixed income securities (excluding short-term):				
2.1 Unaffiliated domestic securities (includes credit tenant loans and hybrid securities).....		0.0		0.0
2.2 Unaffiliated non-U.S. securities (including Canada).....		0.0		0.0
2.3 Affiliated securities.....		0.0		0.0
3. Equity interests:				
3.1 Investments in mutual funds.....		0.0		0.0
3.2 Preferred stocks:				
3.21 Affiliated.....		0.0		0.0
3.22 Unaffiliated.....		0.0		0.0
3.3 Publicly traded equity securities (excluding preferred stocks):				
3.31 Affiliated.....		0.0		0.0
3.32 Unaffiliated.....		0.0		0.0
3.4 Other equity securities:				
3.41 Affiliated.....		0.0		0.0
3.42 Unaffiliated.....		0.0		0.0
3.5 Other equity interests including tangible personal property under lease:				
3.51 Affiliated.....		0.0		0.0
3.52 Unaffiliated.....		0.0		0.0
4. Mortgage loans:				
4.1 Construction and land development.....		0.0		0.0
4.2 Agricultural.....		0.0		0.0
4.3 Single family residential properties.....		0.0		0.0
4.4 Multifamily residential properties.....		0.0		0.0
4.5 Commercial loans.....		0.0		0.0
4.6 Mezzanine real estate loans.....		0.0		0.0
5. Real estate investments:				
5.1 Property occupied by company.....		0.0		0.0
5.2 Property held for production of income (including \$.....0 of property acquired in satisfaction of debt).....		0.0		0.0
5.3 Property held for sale (including \$.....0 property acquired in satisfaction of debt).....		0.0		0.0
6. Contract loans.....		0.0		0.0
7. Receivables for securities.....		0.0		0.0
8. Cash, cash equivalents and short-term investments.....	472,376	82.3	472,376	82.3
9. Other invested assets.....		0.0		0.0
10. Total invested assets.....	574,217	100.0	574,217	100.0

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1.	Book/adjusted carrying value, December 31 of prior year.....	_____	
2.	Cost of acquired:		
2.1	Actual cost at time of acquisition (Part 2, Column 6).....	_____	
2.2	Additional investment made after acquisition (Part 2, Column 9).....	_____	0
3.	Current year change in encumbrances:		
3.1	Totals, Part 1, Column 13.....	_____	
3.2	Totals, Part 3, Column 11.....	_____	0
4.	Total gain (loss) on disposals, Part 3, Column 18.....	_____	
5.	Deduct amounts received on disposals, Part 3, Column 15.....	_____	
6.	Total foreign exchange change in book/adjusted carrying value:		
6.1	Totals, Part 1, Column 15.....	_____	
6.2	Totals, Part 3, Column 13.....	_____	0
7.	Deduct current year's other than temporary impairment recognized:		
7.1	Totals, Part 1, Column 12.....	_____	
7.2	Totals, Part 3, Column 10.....	_____	0
8.	Deduct current year's depreciation:		
8.1	Totals, Part 1, Column 11.....	_____	
8.2	Totals, Part 3, Column 9.....	_____	0
9.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	_____	0
10.	Deduct total nonadmitted amounts.....	_____	
11.	Statement value at end of current period (Line 9 minus Line 10).....	_____	0

NONE

SCHEDULE B - VERIFICATION BETWEEN YEARS

Mortgage Loans

1.	Book value/recorded investment excluding accrued interest, December 31 of prior year.....	_____	
2.	Cost of acquired:		
2.1	Actual cost at time of acquisition (Part 2, Column 7).....	_____	
2.2	Additional investment made after acquisition (Part 2, Column 8).....	_____	0
3.	Capitalized deferred interest and other:		
3.1	Totals, Part 1, Column 12.....	_____	
3.2	Totals, Part 3, Column 11.....	_____	0
4.	Accrual of discount.....	_____	
5.	Unrealized valuation increase (decrease):		
5.1	Totals, Part 1, Column 9.....	_____	
5.2	Totals, Part 3, Column 8.....	_____	0
6.	Total gain (loss) on disposals, Part 3, Column 18.....	_____	
7.	Deduct amounts received on disposals, Part 3, Column 15.....	_____	
8.	Deduct amortization of premium and mortgage interest points and commitment fees.....	_____	
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest:		
9.1	Totals, Part 1, Column 13.....	_____	
9.2	Totals, Part 3, Column 13.....	_____	0
10.	Deduct current year's other than temporary impairment recognized:		
10.1	Totals, Part 1, Column 11.....	_____	
10.2	Totals, Part 3, Column 10.....	_____	0
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	_____	0
12.	Total valuation allowance.....	_____	
13.	Subtotal (Line 11 plus Line 12).....	_____	0
14.	Deduct total nonadmitted amounts.....	_____	
15.	Statement value at end of current period (Line 13 minus Line 14).....	_____	0

NONE

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1. Book/adjusted carrying value, December 31 of prior year.....		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition (Part 2, Column 8).....		
2.2 Additional investment made after acquisition (Part 2, Column 9).....		0
3. Capitalized deferred interest and other:		
3.1 Totals, Part 1, Column 16.....		
3.2 Totals, Part 3, Column 12.....		0
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease):		
5.1 Totals, Part 1, Column 13.....	NONE	
5.2 Totals, Part 3, Column 9.....		0
6. Total gain (loss) on disposals, Part 3, Column 19.....		
7. Deduct amounts received on disposals, Part 3, Column 16.....		
8. Deduct amortization of premium and depreciation.....		
9. Total foreign exchange change in book/adjusted carrying value:		
9.1 Totals, Part 1, Column 17.....		
9.2 Totals, Part 3, Column 14.....		0
10. Deduct current year's other than temporary impairment recognized:		
10.1 Totals, Part 1, Column 15.....		
10.2 Totals, Part 3, Column 11.....		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....		0
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....		0

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1. Book/adjusted carrying value, December 31 of prior year.....		103,912
2. Cost of bonds and stocks acquired, Part 3, Column 7.....		
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease):		
4.1 Part 1, Column 12.....		
4.2 Part 2, Section 1, Column 15.....		
4.3 Part 2, Section 2, Column 13.....		
4.4 Part 4, Column 11.....		0
5. Total gain (loss) on disposals, Part 4, Column 19.....		
6. Deduct consideration for bonds and stocks disposed of, Part 4, Column 7.....		
7. Deduct amortization of premium.....		2,071
8. Total foreign exchange change in book/adjusted carrying value:		
8.1 Part 1, Column 15.....		
8.2 Part 2, Section 1, Column 19.....		
8.3 Part 2, Section 2, Column 16.....		
8.4 Part 4, Column 15.....		0
9. Deduct current year's other than temporary impairment recognized:		
9.1 Part 1, Column 14.....		
9.2 Part 2, Section 1, Column 17.....		
9.3 Part 2, Section 2, Column 14.....		
9.4 Part 4, Column 13.....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....		101,841
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....		101,841

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (Including all obligations guaranteed by governments)	1. United States.....	101,841	103,480	105,281	100,000
	2. Canada.....				
	3. Other Countries.....				
	4. Totals.....	101,841	103,480	105,281	100,000
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals.....				
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals.....				
U.S. Special Revenue and Special Assessment Obligations and All Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions	7. Totals.....				
Industrial and Miscellaneous, Credit Tenant Loans and Hybrid Securities (Unaffiliated)	8. United States.....				
	9. Canada.....				
	10. Other Countries.....				
	11. Totals.....	0	0	0	0
Parent, Subsidiaries and Affiliates	12. Totals.....				
	13. Total Bonds.....	101,841	103,480	105,281	100,000
PREFERRED STOCKS					
Industrial and Miscellaneous (Unaffiliated)	14. United States.....				
	15. Canada.....				
	16. Other Countries.....				
	17. Totals.....	0	0	0	0
Parent, Subsidiaries and Affiliates	18. Totals.....				
	19. Total Preferred Stocks.....	0	0	0	0
COMMON STOCKS					
Industrial and Miscellaneous (Unaffiliated)	20. United States.....				
	21. Canada.....				
	22. Other Countries.....				
	23. Totals.....	0	0	0	0
Parent, Subsidiaries and Affiliates	24. Totals.....				
	25. Total Common Stocks.....	0	0	0	0
	26. Total Stocks.....	0	0	0	0
	27. Total Bonds and Stocks....	101,841	103,480	105,281	

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

S015

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments											
1.1 Class 1.....	557,406					557,406	100.0	103,912	18.3	557,406	
1.2 Class 2.....						.0	.00		.00		
1.3 Class 3.....						.0	.00		.00		
1.4 Class 4.....						.0	.00		.00		
1.5 Class 5.....						.0	.00		.00		
1.6 Class 6.....						.0	.00		.00		
1.7 Totals.....	557,406	.0	.0	.0	.0	557,406	100.0	103,912	18.3	557,406	.0
2. All Other Governments											
2.1 Class 1.....						.0	.00		.00		
2.2 Class 2.....						.0	.00		.00		
2.3 Class 3.....						.0	.00		.00		
2.4 Class 4.....						.0	.00		.00		
2.5 Class 5.....						.0	.00		.00		
2.6 Class 6.....						.0	.00		.00		
2.7 Totals.....	.0	.0	.0	.0	.0	.0	.00	.0	.00	.0	.0
3. U.S. States, Territories and Possessions, etc., Guaranteed											
3.1 Class 1.....						.0	.00		.00		
3.2 Class 2.....						.0	.00		.00		
3.3 Class 3.....						.0	.00		.00		
3.4 Class 4.....						.0	.00		.00		
3.5 Class 5.....						.0	.00		.00		
3.6 Class 6.....						.0	.00		.00		
3.7 Totals.....	.0	.0	.0	.0	.0	.0	.00	.0	.00	.0	.0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed											
4.1 Class 1.....						.0	.00		.00		
4.2 Class 2.....						.0	.00		.00		
4.3 Class 3.....						.0	.00		.00		
4.4 Class 4.....						.0	.00		.00		
4.5 Class 5.....						.0	.00		.00		
4.6 Class 6.....						.0	.00		.00		
4.7 Totals.....	.0	.0	.0	.0	.0	.0	.00	.0	.00	.0	.0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed											
5.1 Class 1.....						.0	.00		.00		
5.2 Class 2.....						.0	.00		.00		
5.3 Class 3.....						.0	.00		.00		
5.4 Class 4.....						.0	.00		.00		
5.5 Class 5.....						.0	.00		.00		
5.6 Class 6.....						.0	.00		.00		
5.7 Totals.....	.0	.0	.0	.0	.0	.0	.00	.0	.00	.0	.0

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Industrial and Miscellaneous (unaffiliated)											
6.1 Class 1.....						.0	.00	464,162	81.7		
6.2 Class 2.....						.0	.00		.00		
6.3 Class 3.....						.0	.00		.00		
6.4 Class 4.....						.0	.00		.00		
6.5 Class 5.....						.0	.00		.00		
6.6 Class 6.....						.0	.00		.00		
6.7 Totals.....	.0	.0	.0	.0	.0	.0	.00	464,162	81.7	.0	.0
7. Credit Tenant Loans											
7.1 Class 1.....						.0	.00		.00		
7.2 Class 2.....						.0	.00		.00		
7.3 Class 3.....						.0	.00		.00		
7.4 Class 4.....						.0	.00		.00		
7.5 Class 5.....						.0	.00		.00		
7.6 Class 6.....						.0	.00		.00		
7.7 Totals.....	.0	.0	.0	.0	.0	.0	.00	.0	.00	.0	.0
8. Hybrid Securities											
8.1 Class 1.....						.0	.00		.00		
8.2 Class 2.....						.0	.00		.00		
8.3 Class 3.....						.0	.00		.00		
8.4 Class 4.....						.0	.00		.00		
8.5 Class 5.....						.0	.00		.00		
8.6 Class 6.....						.0	.00		.00		
8.7 Totals.....	.0	.0	.0	.0	.0	.0	.00	.0	.00	.0	.0
9. Parent, Subsidiaries and Affiliates											
9.1 Class 1.....						.0	.00		.00		
9.2 Class 2.....						.0	.00		.00		
9.3 Class 3.....						.0	.00		.00		
9.4 Class 4.....						.0	.00		.00		
9.5 Class 5.....						.0	.00		.00		
9.6 Class 6.....						.0	.00		.00		
9.7 Totals.....	.0	.0	.0	.0	.0	.0	.00	.0	.00	.0	.0

901S

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
10. Total Bonds Current Year											
10.1 Class 1.....	(d).....557,406	.....0	.....0	.....0	.....0	.....557,406	.....100.0	.....XXX	.....XXX	.....557,406	.....0
10.2 Class 2.....	(d).....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....XXX	.....XXX	.....0	.....0
10.3 Class 3.....	(d).....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....XXX	.....XXX	.....0	.....0
10.4 Class 4.....	(d).....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....XXX	.....XXX	.....0	.....0
10.5 Class 5.....	(d).....0	.....0	.....0	.....0	.....0	(c).....0	.....0.0	.....XXX	.....XXX	.....0	.....0
10.6 Class 6.....	(d).....0	.....0	.....0	.....0	.....0	(c).....0	.....0.0	.....XXX	.....XXX	.....0	.....0
10.7 Totals.....	.....557,406	.....0	.....0	.....0	.....0	(b).....557,406	.....100.0	.....XXX	.....XXX	.....557,406	.....0
10.8 Line 10.7 as a % of Col. 6.....	.....100.0	.....0.0	.....0.0	.....0.0	.....0.0	.....100.0	.....XXX	.....XXX	.....XXX	.....100.0	.....0.0
11. Total Bonds Prior Year											
11.1 Class 1.....	.....464,162	.....103,912				.....XXX	.....XXX	.....568,074	.....100.0	.....568,074	
11.2 Class 2.....						.....XXX	.....XXX	.....0	.....0.0		
11.3 Class 3.....						.....XXX	.....XXX	.....0	.....0.0		
11.4 Class 4.....						.....XXX	.....XXX	.....0	.....0.0		
11.5 Class 5.....						.....XXX	.....XXX	(c).....0	.....0.0		
11.6 Class 6.....						.....XXX	.....XXX	(c).....0	.....0.0		
11.7 Totals.....	.....464,162	.....103,912	.....0	.....0	.....0	.....XXX	.....XXX	(b).....568,074	.....100.0	.....568,074	.....0
11.8 Line 11.7 as a % of Col. 8.....	.....81.7	.....18.3	.....0.0	.....0.0	.....0.0	.....XXX	.....XXX	.....100.0	.....XXX	.....100.0	.....0.0
12. Total Publicly Traded Bonds											
12.1 Class 1.....	.....557,405					.....557,405	.....100.0	.....568,074	.....100.0	.....557,405	.....XXX
12.2 Class 2.....						.....0	.....0.0	.....0	.....0.0	.....0	.....XXX
12.3 Class 3.....						.....0	.....0.0	.....0	.....0.0	.....0	.....XXX
12.4 Class 4.....						.....0	.....0.0	.....0	.....0.0	.....0	.....XXX
12.5 Class 5.....						.....0	.....0.0	.....0	.....0.0	.....0	.....XXX
12.6 Class 6.....						.....0	.....0.0	.....0	.....0.0	.....0	.....XXX
12.7 Totals.....	.....557,405	.....0	.....0	.....0	.....0	.....557,405	.....100.0	.....568,074	.....100.0	.....557,405	.....XXX
12.8 Line 12.7 as a % of Col. 6.....	.....100.0	.....0.0	.....0.0	.....0.0	.....0.0	.....100.0	.....XXX	.....XXX	.....XXX	.....100.0	.....XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10.....	.....100.0	.....0.0	.....0.0	.....0.0	.....0.0	.....100.0	.....XXX	.....XXX	.....XXX	.....100.0	.....XXX
13. Total Privately Placed Bonds											
13.1 Class 1.....						.....0	.....0.0	.....0	.....0.0	.....XXX	.....0
13.2 Class 2.....						.....0	.....0.0	.....0	.....0.0	.....XXX	.....0
13.3 Class 3.....						.....0	.....0.0	.....0	.....0.0	.....XXX	.....0
13.4 Class 4.....						.....0	.....0.0	.....0	.....0.0	.....XXX	.....0
13.5 Class 5.....						.....0	.....0.0	.....0	.....0.0	.....XXX	.....0
13.6 Class 6.....						.....0	.....0.0	.....0	.....0.0	.....XXX	.....0
13.7 Totals.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....XXX	.....0
13.8 Line 13.7 as a % of Col. 6.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....XXX	.....XXX	.....XXX	.....XXX	.....0.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....XXX	.....XXX	.....XXX	.....XXX	.....0.0

S107

- (a) Includes \$.....0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
- (b) Includes \$.....0 current year, \$.....0 prior year of bonds with Z designations and \$.....0 current year, \$.....0 prior year of bonds with Z* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class are under regulatory review.
- (c) Includes \$.....0 current year, \$.....0 prior year of bonds with 5* designations and \$.....0 current year, \$.....0 prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.
- (d) Includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$....455,565; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Distribution by Type		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1. U.S. Governments												
1.1 Issuer Obligations.....	557,406					557,406	100.0	103,912	18.3	557,406		
1.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	.0		.0			
1.7 Totals.....	557,406	0	0	0	0	557,406	100.0	103,912	18.3	557,406		0
2. All Other Governments												
2.1 Issuer Obligations.....						.0	.0		.0			
2.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	.0		.0			
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:												
2.3 Defined.....						.0	.0		.0			
2.4 Other.....						.0	.0		.0			
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:												
2.5 Defined.....						.0	.0		.0			
2.6 Other.....						.0	.0		.0			
2.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0		0
3. U.S. States, Territories and Possessions, Guaranteed												
3.1 Issuer Obligations.....						.0	.0		.0			
3.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	.0		.0			
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:												
3.3 Defined.....						.0	.0		.0			
3.4 Other.....						.0	.0		.0			
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:												
3.5 Defined.....						.0	.0		.0			
3.6 Other.....						.0	.0		.0			
3.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0		0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.1 Issuer Obligations.....						.0	.0		.0			
4.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	.0		.0			
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:												
4.3 Defined.....						.0	.0		.0			
4.4 Other.....						.0	.0		.0			
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:												
4.5 Defined.....						.0	.0		.0			
4.6 Other.....						.0	.0		.0			
4.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0		0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 Issuer Obligations.....						.0	.0		.0			
5.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	.0		.0			
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:												
5.3 Defined.....						.0	.0		.0			
5.4 Other.....						.0	.0		.0			
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:												
5.5 Defined.....						.0	.0		.0			
5.6 Other.....						.0	.0		.0			
5.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0		0

8018

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
6. Industrial and Miscellaneous (unaffiliated)											
6.1 Issuer Obligations.....						.0	.0	464,162	81.7		
6.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	.0		.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
6.3 Defined.....						.0	.0		.0		
6.4 Other.....						.0	.0		.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
6.5 Defined.....						.0	.0		.0		
6.6 Other.....						.0	.0		.0		
6.7 Totals.....	0	0	0	0	0	0	0.0	464,162	81.7	0	0
7. Credit Tenant Loans											
7.1 Issuer Obligations.....						.0	.0		.0		
7.2 Single Class Mortgage-Backed Securities.....						.0	.0		.0		
7.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0
8. Hybrid Securities											
8.1 Issuer Obligations.....						.0	.0		.0		
8.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	.0		.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
8.3 Defined.....						.0	.0		.0		
8.4 Other.....						.0	.0		.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
8.5 Defined.....						.0	.0		.0		
8.6 Other.....						.0	.0		.0		
8.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parent, Subsidiaries and Affiliates											
9.1 Issuer Obligations.....						.0	.0		.0		
9.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	.0		.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
9.3 Defined.....						.0	.0		.0		
9.4 Other.....						.0	.0		.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
9.5 Defined.....						.0	.0		.0		
9.6 Other.....						.0	.0		.0		
9.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0

601S

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
10. Total Bonds Current Year											
10.1 Issuer Obligations.....	557,406	.0	.0	.0	.0	557,406	100.0	.XXX.	.XXX.	557,406	.0
10.2 Single Class Mortgage-Backed/Asset-Backed Securities.....	.0	.0	.0	.0	.0	.0	.0.0	.XXX.	.XXX.	.0	.0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
10.3 Defined.....	.0	.0	.0	.0	.0	.0	.0.0	.XXX.	.XXX.	.0	.0
10.4 Other.....	.0	.0	.0	.0	.0	.0	.0.0	.XXX.	.XXX.	.0	.0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
10.5 Defined.....	.0	.0	.0	.0	.0	.0	.0.0	.XXX.	.XXX.	.0	.0
10.6 Other.....	.0	.0	.0	.0	.0	.0	.0.0	.XXX.	.XXX.	.0	.0
10.7 Totals.....	557,406	.0	.0	.0	.0	557,406	100.0	.XXX.	.XXX.	557,406	.0
10.8 Line 10.7 as a % of Col. 6.....	100.0	.0.0	.0.0	.0.0	.0.0	100.0	.XXX.	.XXX.	.XXX.	100.0	.0.0
11. Total Bonds Prior Year											
11.1 Issuer Obligations.....	464,162	103,912				.XXX.	.XXX.	568,074	100.0	568,074	
11.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.XXX.	.XXX.	.0	.0.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
11.3 Defined.....						.XXX.	.XXX.	.0	.0.0		
11.4 Other.....						.XXX.	.XXX.	.0	.0.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
11.5 Defined.....						.XXX.	.XXX.	.0	.0.0		
11.6 Other.....						.XXX.	.XXX.	.0	.0.0		
11.7 Totals.....	464,162	103,912	.0	.0	.0	.XXX.	.XXX.	568,074	100.0	568,074	.0
11.8 Line 11.7 as a % of Col. 8.....	81.7	18.3	.0.0	.0.0	.0.0	.XXX.	.XXX.	100.0	.XXX.	100.0	.0.0
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations.....	557,405					557,405	100.0	568,074	100.0	557,405	.XXX.
12.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	.0.0	.0	.0.0	.0	.XXX.
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
12.3 Defined.....						.0	.0.0	.0	.0.0	.0	.XXX.
12.4 Other.....						.0	.0.0	.0	.0.0	.0	.XXX.
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
12.5 Defined.....						.0	.0.0	.0	.0.0	.0	.XXX.
12.6 Other.....						.0	.0.0	.0	.0.0	.0	.XXX.
12.7 Totals.....	557,405	.0	.0	.0	.0	557,405	100.0	568,074	100.0	557,405	.XXX.
12.8 Line 12.7 as a % of Col. 6.....	100.0	.0.0	.0.0	.0.0	.0.0	100.0	.XXX.	.XXX.	.XXX.	100.0	.XXX.
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10.....	100.0	.0.0	.0.0	.0.0	.0.0	100.0	.XXX.	.XXX.	.XXX.	100.0	.XXX.
13. Total Privately Placed Bonds											
13.1 Issuer Obligations.....						.0	.0.0	.0	.0.0	.XXX.	.0
13.2 Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	.0.0	.0	.0.0	.XXX.	.0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
13.3 Defined.....						.0	.0.0	.0	.0.0	.XXX.	.0
13.4 Other.....						.0	.0.0	.0	.0.0	.XXX.	.0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
13.5 Defined.....						.0	.0.0	.0	.0.0	.XXX.	.0
13.6 Other.....						.0	.0.0	.0	.0.0	.XXX.	.0
13.7 Totals.....	.0	.0	.0	.0	.0	.0	.0.0	.0	.0.0	.XXX.	.0
13.8 Line 13.7 as a % of Col. 6.....	.0.0	.0.0	.0.0	.0.0	.0.0	.0.0	.XXX.	.XXX.	.XXX.	.XXX.	.0.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10.....	.0.0	.0.0	.0.0	.0.0	.0.0	.0.0	.XXX.	.XXX.	.XXX.	.XXX.	.0.0

SI10

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value December 31 of prior year.....	4,335	4,335			
2. Cost of short-term investments acquired.....	976,068	976,068			
3. Accrual of discount.....	444	444			
4. Unrealized valuation increase (decrease).....	.0				
5. Total gain (loss) on disposals.....	.0				
6. Deduct consideration received on disposals.....	975,267	975,267			
7. Deduct amortization of premium.....	.0				
8. Total foreign exchange change in book/adjusted carrying value.....	.0				
9. Deduct current year's other than temporary impairment recognized.....	.0				
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	5,580	5,580	.0	.0	.0
11. Deduct total nonadmitted amounts.....	.0				
12. Statement value at end of current period (Line 10 minus Line 11).....	5,580	5,580	.0	.0	.0

S111

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:.....

Sch. DB-Pt. A-Verification
NONE

Sch. DB-Pt. B-Verification
NONE

Sch. DB-Pt. C-Verification
NONE

Sch. DB-Pt. D-Verification
NONE

Sch. DB-Pt. E-Verification
NONE

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

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

SCHEDULE E- VERIFICATION BETWEEN YEARS

Cash Equivalents

	1 Total	2 Bonds	3 Other (a)
1. Book/adjusted carrying value, December 31 of prior year.....	459,827	459,827	
2. Cost of cash equivalents acquired.....	899,731	899,731	
3. Accrual of discount.....	426	426	
4. Unrealized valuation increase (decrease).....	0		
5. Total gain (loss) on disposals.....	0		
6. Deduct consideration received on disposals.....	910,000	910,000	
7. Deduct amortization of premium.....	0		
8. Total foreign exchange change in book/adjusted carrying value.....	0		
9. Deduct current year's other than temporary impairment recognized.....	0		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	449,984	449,984	0
11. Deduct total nonadmitted amounts.....	0		
12. Statement value at end of current period (Line 10 minus Line 11).....	449,984	449,984	0

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment:.....

Sch. A-Pt. 1
NONE

Sch. A-Pt. 2
NONE

Sch. A-Pt. 3
NONE

Sch. B-Pt. 1
NONE

Sch. B-Pt. 2
NONE

Sch. B-Pt. 3
NONE

Sch. BA-Pt. 1
NONE

Sch. BA-Pt. 2
NONE

Sch. BA-Pt. 3
NONE

SCHEDULE D - PART 1

Showing all Long-Term BONDS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	Codes			6 NAIC Designation	7 Actual Cost	Fair Value		10 Par Value	11 Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value				Interest					Dates	
		3 Code	4 F o r e i g n	5 Bond CHAR			8 Rate Used to Obtain Fair Value	9 Fair Value			12 Unrealized Valuation Increase/ (Decrease)	13 Current Year's (Amortization)/ Accretion	14 Current Year's Other Than Temporary Impairment Recognized	15 Total Foreign Exchange Change in B./A.C.V.	16 Rate of	17 Effective Rate of	18 When Paid	19 Admitted Amount Due and Accrued	20 Amount Received During Year	21 Acquired	22 Maturity
U.S. Government - Issuer Obligations																					
912828 EM 8	US TREASURY N/B	SD			1	105,281	103,480	103,480	100,000	101,841		(2,071)			4,500	2,340	MN	584	4,500	04/29/2008	11/15/2010
0199999	U.S. Government - Issuer Obligations					105,281	XXX	103,480	100,000	101,841	0	(2,071)	0	0	XXX	XXX	XXX	584	4,500	XXX	XXX
0399999	Total - U.S. Government					105,281	XXX	103,480	100,000	101,841	0	(2,071)	0	0	XXX	XXX	XXX	584	4,500	XXX	XXX
Totals																					
7799999	Total - Issuer Obligations					105,281	XXX	103,480	100,000	101,841	0	(2,071)	0	0	XXX	XXX	XXX	584	4,500	XXX	XXX
8399999	Grand Total - Bonds					105,281	XXX	103,480	100,000	101,841	0	(2,071)	0	0	XXX	XXX	XXX	584	4,500	XXX	XXX

Sch. D-Pt. 2-Sn. 1
NONE

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

Sch. D-Pt. 3
NONE

Sch. D-Pt. 4
NONE

Sch. D-Pt. 5
NONE

Sch. D-Pt. 6-Sn. 1
NONE

Sch. D-Pt. 6-Sn. 2
NONE

SCHEDULE DA - PART 1

Showing all SHORT-TERM INVESTMENTS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	Codes		5 Date Acquired	6 Name of Vendor	7 Maturity Date	8 Book/ Adjusted Carrying Value	Change in Book/Adjusted Carrying Value				13 Par Value	14 Actual Cost	Interest						21 Paid for Accrued Interest	
		3 Code	4 F o r e i g n					9 Unrealized Valuation Increase/ (Decrease)	10 Current Year's (Amortization)/ Accretion	11 Current Year's Other Than Temporary Impairment Recognized	12 Total Foreign Exchange Change in B./A.C.V.			15 Amount Due and Accrued December 31 of Current Year on Bond Not in Default	16 Non- Admitted Due and Accrued	17 Rate of	18 Effective Rate of	19 When Paid	20 Amount Received During Year		
Exempt Money Market Mutual Funds																					
31846V 56 7	FIRST AMERICAN GOV OBLIG-Z			12/30/2009	DIRECT	XXX	5,580					5,580	5,580			0.010	0.010	MAT			
88999999	Total - Exempt Money Market Mutual Funds						5,580	0	0	0	0	XXX	5,580	0	0	XXX	XXX	XXX		0	0
91999999	Total - Short-Term Investments						5,580	0	0	0	0	XXX	5,580	0	0	XXX	XXX	XXX		0	0

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

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

**Sch. DB-Pt. A-Sn. 3
NONE**

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

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

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

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

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

**Sch. DB-Pt. C-Sn. 3
NONE**

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

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

**Sch. DB-Pt. D-Sn. 3
NONE**

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

Annual Statement for the year 2009 of the **AMERICAN MEDICAL INSURANCE EXCHANGE**
SCHEDULE E - PART 1 - CASH

1	2	3	4	5	6	7
Depository	Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
Open Depositories						
US BANK..... BIRMINGHAM, AL.....					16,812	XXX
0199999. Total - Open Depositories.....	.XXX.	.XXX.	0	0	16,812	XXX
0399999. Total Cash on Deposit.....	.XXX.	.XXX.	0	0	16,812	XXX
0599999. Total Cash.....	.XXX.	.XXX.	0	0	16,812	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1. January.....	4,295	4. April.....	8,286	7. July.....	17,279	10. October.....	16,530
2. February.....	7,222	5. May.....	8,286	8. August.....	17,279	11. November.....	16,522
3. March.....	6,204	6. June.....	8,264	9. September.....	17,279	12. December.....	16,812

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
U.S. Government Bonds - Issuer Obligations							
FED HOME LN DISCOUNT NT.....		10/16/2009	0.090	01/15/2010	449,984		.87
0199999. U.S. Government Bonds - Issuer Obligations.....					449,984	.0	.87
0399999. Total - U.S. Government Bonds.....					449,984	.0	.87
Total Bonds							
7799999. Subtotals - Issuer Obligations.....					449,984	.0	.87
8399999. Subtotals - Bonds.....					449,984	.0	.87
8699999. Total - Cash Equivalents.....					449,984	.0	.87

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, Etc.	1 Type of Deposit	2 Purpose of Deposit	Deposits for the Benefit of All Policyholders		All Other Special Deposits	
			3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
1. Alabama.....	AL					
2. Alaska.....	AK					
3. Arizona.....	AZ					
4. Arkansas.....	AR					
5. California.....	CA					
6. Colorado.....	CO					
7. Connecticut.....	CT					
8. Delaware.....	DE					
9. District of Columbia.....	DC					
10. Florida.....	FL					
11. Georgia.....	GA					
12. Hawaii.....	HI					
13. Idaho.....	ID					
14. Illinois.....	IL					
15. Indiana.....	IN	B.... P&C Pledged to the IN Dept of Insurance.....	101,841	103,480		
16. Iowa.....	IA					
17. Kansas.....	KS					
18. Kentucky.....	KY					
19. Louisiana.....	LA					
20. Maine.....	ME					
21. Maryland.....	MD					
22. Massachusetts.....	MA					
23. Michigan.....	MI					
24. Minnesota.....	MN					
25. Mississippi.....	MS					
26. Missouri.....	MO					
27. Montana.....	MT					
28. Nebraska.....	NE					
29. Nevada.....	NV					
30. New Hampshire.....	NH					
31. New Jersey.....	NJ					
32. New Mexico.....	NM					
33. New York.....	NY					
34. North Carolina.....	NC					
35. North Dakota.....	ND					
36. Ohio.....	OH					
37. Oklahoma.....	OK					
38. Oregon.....	OR					
39. Pennsylvania.....	PA					
40. Rhode Island.....	RI					
41. South Carolina.....	SC					
42. South Dakota.....	SD					
43. Tennessee.....	TN					
44. Texas.....	TX					
45. Utah.....	UT					
46. Vermont.....	VT					
47. Virginia.....	VA					
48. Washington.....	WA					
49. West Virginia.....	WV					
50. Wisconsin.....	WI					
51. Wyoming.....	WY					
52. American Samoa.....	AS					
53. Guam.....	GU					
54. Puerto Rico.....	PR					
55. US Virgin Islands.....	VI					
56. Northern Mariana Islands.....	MP					
57. Canada.....	CN					
58. Aggregate Alien and Other.....	OT	XXX	0	0	0	0
59. Total.....	XXX	XXX	101,841	103,480	0	0

DETAILS OF WRITE-INS

5801.						
5802.						
5803.						
5898. Summary of remaining write-ins for line 58 from overflow page.....	XXX	XXX	0	0	0	0
5899. Total (Lines 5801 thru 5803+5898) (Line 58 above).....	XXX	XXX	0	0	0	0

2009 ALPHABETICAL INDEX -- PROPERTY & CASUALTY ANNUAL STATEMENT BLANK

Assets	2	Schedule P-Part 2F-Section 1-Medical Professional Liability-Occurrence	56
Cash Flow	5	Schedule P-Part 2F-Section 2-Medical Professional Liability-Claims-Made	56
Exhibit of Capital Gains (Losses)	12	Schedule P-Part 2G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	56
Exhibit of Net Investment Income	12	Schedule P-Part 2H-Section 1-Other Liability-Occurrence	56
Exhibit of Nonadmitted Assets	13	Schedule P-Part 2H-Section 2-Other Liability-Claims-Made	56
Exhibit of Premiums and Losses (State Page)	19	Schedule P-Part 2I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	57
Five-Year Historical Data	17	Schedule P-Part 2J-Auto Physical Damage	57
General Interrogatories	15	Schedule P-Part 2K-Fidelity, Surety	57
Jurat Page	1	Schedule P-Part 2L-Other (Including Credit, Accident and Health)	57
Liabilities, Surplus and Other Funds	3	Schedule P-Part 2M-International	57
Notes To Financial Statements	14	Schedule P-Part 2N-Reinsurance	58
Overflow Page For Write-ins	97	Schedule P-Part 2O-Reinsurance	58
Schedule A-Part 1	E01	Schedule P-Part 2P-Reinsurance	58
Schedule A-Part 2	E02	Schedule P-Part 2R-Section 1-Products Liability-Occurrence	59
Schedule A-Part 3	E03	Schedule P-Part 2R-Section 2-Products Liability-Claims-Made	59
Schedule A-Verification Between Years	SI02	Schedule P-Part 2S-Financial Guaranty/Mortgage Guaranty	59
Schedule B-Part 1	E04	Schedule P-Part 2T-Warranty	59
Schedule B-Part 2	E05	Schedule P-Part 3-Summary	32
Schedule B-Part 3	E06	Schedule P-Part 3A-Homeowners/Farmowners	60
Schedule B-Verification Between Years	SI02	Schedule P-Part 3B-Private Passenger Auto Liability/Medical	60
Schedule BA-Part 1	E07	Schedule P-Part 3C-Commercial Auto/Truck Liability/Medical	60
Schedule BA-Part 2	E08	Schedule P-Part 3D-Workers' Compensation	60
Schedule BA-Part 3	E09	Schedule P-Part 3E-Commercial Multiple Peril	60
Schedule BA-Verification Between Years	SI03	Schedule P-Part 3F-Section 1-Medical Professional Liability-Occurrence	61
Schedule D-Part 1	E10	Schedule P-Part 3F-Section 2-Medical Professional Liability-Claims-Made	61
Schedule D-Part 1A-Section 1	SI05	Schedule P-Part 3G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	61
Schedule D-Part 1A-Section 2	SI08	Schedule P-Part 3H-Section 1-Other Liability-Occurrence	61
Schedule D-Part 2-Section 1	E11	Schedule P-Part 3H-Section 2-Other Liability-Claims-Made	61
Schedule D-Part 2-Section 2	E12	Schedule P-Part 3I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	62
Schedule D-Part 3	E13	Schedule P-Part 3J-Auto Physical Damage	62
Schedule D-Part 4	E14	Schedule P-Part 3K-Fidelity/Surety	62
Schedule D-Part 5	E15	Schedule P-Part 3L-Other (Including Credit, Accident and Health)	62
Schedule D-Part 6-Section 1	E16	Schedule P-Part 3M-International	62
Schedule D-Part 6-Section 2	E16	Schedule P-Part 3N-Reinsurance	63
Schedule D-Summary By Country	SI04	Schedule P-Part 3O-Reinsurance	63
Schedule D-Verification Between Years	SI03	Schedule P-Part 3P-Reinsurance	63
Schedule DA-Part 1	E17	Schedule P-Part 3R-Section 1-Products Liability-Occurrence	64
Schedule DA-Verification Between Years	SI11	Schedule P-Part 3R-Section 2-Products Liability-Claims-Made	64
Schedule DB-Part A-Section 1	E18	Schedule P-Part 3S-Financial Guaranty/Mortgage Guaranty	64
Schedule DB-Part A-Section 2	E18	Schedule P-Part 3T-Warranty	64
Schedule DB-Part A-Section 3	E19	Schedule P-Part 4-Summary	32
Schedule DB-Part A-Verification Between Years	SI12	Schedule P-Part 4A-Homeowners/Farmowners	65
Schedule DB-Part B-Section 1	E19	Schedule P-Part 4B-Private Passenger Auto Liability/Medical	65
Schedule DB-Part B-Section 2	E20	Schedule P-Part 4C-Commercial Auto/Truck Liability/Medical	65
Schedule DB-Part B-Section 3	E20	Schedule P-Part 4D-Workers' Compensation	65
Schedule DB-Part B-Verification Between Years	SI12	Schedule P-Part 4E-Commercial Multiple Peril	65
Schedule DB-Part C-Section 1	E21	Schedule P-Part 4F-Section 1-Medical Professional Liability-Occurrence	66
Schedule DB-Part C-Section 2	E21	Schedule P-Part 4F-Section 2-Medical Professional Liability-Claims-Made	66
Schedule DB-Part C-Section 3	E22	Schedule P-Part 4G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	66
Schedule DB-Part C-Verification Between Years	SI13	Schedule P-Part 4H-Section 1-Other Liability-Occurrence	66
Schedule DB-Part D-Section 1	E22	Schedule P-Part 4H-Section 2-Other Liability-Claims-Made	66
Schedule DB-Part D-Section 2	E23	Schedule P-Part 4I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	67
Schedule DB-Part D-Section 3	E23	Schedule P-Part 4J-Auto Physical Damage	67
Schedule DB-Part D-Verification Between Years	SI13	Schedule P-Part 4K-Fidelity/Surety	67
Schedule DB-Part E-Section 1	E24	Schedule P-Part 4L-Other (Including Credit, Accident and Health)	67
Schedule DB-Part E-Verification Between Years	SI13	Schedule P-Part 4M-International	67
Schedule DB-Part F-Section 1	SI14	Schedule P-Part 4N-Reinsurance	68
Schedule DB-Part F-Section 2	SI15	Schedule P-Part 4O-Reinsurance	68
Schedule E-Part 1-Cash	E25	Schedule P-Part 4P-Reinsurance	68
Schedule E-Part 2-Cash Equivalents	E26	Schedule P-Part 4R-Section 1-Products Liability-Occurrence	69
Schedule E-Part 3-Special Deposits	E27	Schedule P-Part 4R-Section 2-Products Liability-Claims-Made	69
Schedule E-Verification	SI16	Schedule P-Part 4S-Financial Guaranty/Mortgage Guaranty	69
Schedule F-Part 1	20	Schedule P-Part 4T-Warranty	69
Schedule F-Part 2	21	Schedule P-Part 5A-Homeowners/Farmowners	70
Schedule F-Part 3	22	Schedule P-Part 5B-Private Passenger Auto Liability/Medical	71
Schedule F-Part 4	23	Schedule P-Part 5C-Commercial Auto/Truck Liability/Medical	72
Schedule F-Part 5	24	Schedule P-Part 5D-Workers' Compensation	73
Schedule F-Part 6	25	Schedule P-Part 5E-Commercial Multiple Peril	74
Schedule F-Part 7	26	Schedule P-Part 5F-Medical Professional Liability-Claims-Made	75
Schedule F-Part 8	27	Schedule P-Part 5F-Medical Professional Liability-Occurrence	76
Schedule H-Accident and Health Exhibit-Part 1	28	Schedule P-Part 5H-Other Liability-Claims-Made	77
Schedule H-Accident and Health Exhibit-Part 2, 3 and 4	29	Schedule P-Part 5H-Other Liability-Occurrence	78
Schedule H-Accident and Health Exhibit-Part 5-Health Claims	30	Schedule P-Part 5R-Products Liability-Claims-Made	79
Schedule P-Part 1-Summary	31	Schedule P-Part 5R-Products Liability-Occurrence	80
Schedule P-Part 1A-Homeowners/Farmowners	33	Schedule P-Part 5T-Warranty	81
Schedule P-Part 1B-Private Passenger Auto Liability/Medical	34	Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical	82
Schedule P-Part 1C-Commercial Auto/Truck Liability/Medical	35	Schedule P-Part 6D-Workers' Compensation	82
Schedule P-Part 1D-Workers' Compensation	36	Schedule P-Part 6E-Commercial Multiple Peril	83
Schedule P-Part 1E-Commercial Multiple Peril	37	Schedule P-Part 6H-Other Liability-Claims-Made	83
Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence	38	Schedule P-Part 6H-Other Liability-Occurrence	84
Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made	39	Schedule P-Part 6M-International	84
Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery)	40	Schedule P-Part 6N-Reinsurance	85
Schedule P-Part 1H-Section 1-Other Liability-Occurrence	41	Schedule P-Part 6O-Reinsurance	85
Schedule P-Part 1H-Section 2-Other Liability-Claims-Made	42	Schedule P-Part 6R-Products Liability-Claims-Made	86
Schedule P-Part 1I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	43	Schedule P-Part 6R-Products Liability-Occurrence	86
Schedule P-Part 1J-Auto Physical Damage	44	Schedule P-Part 7A-Primary Loss Sensitive Contracts	87
Schedule P-Part 1K-Fidelity/Surety	45	Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts	89
Schedule P-Part 1L-Other (Including Credit, Accident and Health)	46	Schedule P Interrogatories	91
Schedule P-Part 1M-International	47	Schedule T-Exhibit of Premiums Written	92
Schedule P-Part 1N-Reinsurance	48	Schedule T-Part 2-Interstate Compact-Exhibit of Premiums Written	93
Schedule P-Part 1O-Reinsurance	49	Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group	94
Schedule P-Part 1P-Reinsurance	50	Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates	95
Schedule P-Part 1R-Section 1-Products Liability-Occurrence	51	Statement of Income	4
Schedule P-Part 1R-Section 2-Products Liability-Claims-Made	52	Summary Investment Schedule	SI01
Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty	53	Supplemental Exhibits and Schedules Interrogatories	96
Schedule P-Part 1T-Warranty	54	Underwriting and Investment Exhibit Part 1-Premiums Earned	6
Schedule P-Part 2-Summary	32	Underwriting and Investment Exhibit Part 1A-Recapitulation of All Premiums	7
Schedule P-Part 2A-Homeowners/Farmowners	55	Underwriting and Investment Exhibit Part 1B-Premiums Written	8
Schedule P-Part 2B-Private Passenger Auto Liability/Medical	55	Underwriting and Investment Exhibit Part 2-Losses Paid and Incurred	9
Schedule P-Part 2C-Commercial Auto/Truck Liability/Medical	55	Underwriting and Investment Exhibit Part 2A-Unpaid Losses and LAE	10
Schedule P-Part 2D-Workers' Compensation	55	Underwriting and Investment Exhibit Part 3-Expenses	11
Schedule P-Part 2E-Commercial Multiple Peril	55		