INDIANA INSTRUCTIONS 12/31/2022

- 1. The annual/quarterly statement filings will need to be uploaded via the Company Document Submission Portal. IDOI no longer requires hardcopy filings to be submitted. To gain access to the Document Submission Portal, you will need to enter the company's NAIC ID and eight-digit numerical PIN that the IDOI assigned your company. If you do not know your PIN, you will need to go to the Company Document Submission Portal and enter company's NAIC ID before clicking on the "Need PIN?" link. You will be provided with the Company's PIN Contact. If the PIN Contact has changed or needs established, please send a request for PIN to the Financial Services main email reflected in Note A below.
- 2. All filings that are required to be filed with our office will be reflected on the company's record in the Document Submission Portal. Filings that are visible with no upload option will need to be sent via email to the Financial Services main email address reflected in Note A below.

Submissions made using the Document Submission Portal will automatically update the official filing record for your company maintained at the IDOI.

Filings will not be generated and available for upload until Mid-January.

- 3. Foreign Insurance Companies, which includes HMOs, and LSHMOs will file in accordance with checklist. Again, the filings required will be listed on the company record.
- 4. Pursuant to Indiana Code 27-1-3-13, annual and quarterly statements must be prepared in accordance with NAIC Annual Statement Instructions.
- 5. Changes to the 2021 Annual Statement as the result of correspondence with this Department, or due to the requirements of other Departments of which this Department has been notified, should be taken into consideration in preparing the 2022 Annual Statement.
- 6. Changes resulting from a Department Examination must be reflected in the Annual Statement.
- 7. Indiana stock companies must comply with Rules 11 & 12 (760 Indiana Administrative Code 1-11 & 760 IAC 1-12) issued in 1966.
- 8. Statement of Condition Section 2 Indiana Code 27-1-18-5:

 At the time of filing its annual statement, an alien or foreign company shall submit, on a form prescribed by the department, a condensed statement of its assets and liabilities as of December 31 of the preceding year. If the department, on examination of such statement, determines from information available to it that it is true and correct, it shall cause such statement to be published in a newspaper in this state selected by the department. In the event the department determines that the statement submitted by a company is inaccurate or incorrect, it shall, after giving the company notice to the proposed changes and an opportunity to be heard, certify the corrected statement and proceed with its publication as above provided. The company shall bear the expenses of the publication, but in no event shall an amount exceeding forty dollars (\$40) be charged for such publication. Any cost of publication that

9. General Instructions for Companies to Use Checklist

Please Note: Indiana's instructions for companies to file with the NAIC are included in this Checklist.

exceeds forty dollars (\$40) must be borne by the newspaper publishing the statement.

Column (1) (Checklist)

This column provides the company a method for marking completed forms or filings.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

Section III Electronic Filing Requirements

The *Annual Statement Electronic Filing* includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions exempt* printed detail.

The *March .PDF Filing* is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The Risk-Based Capital Electronic Filing includes all risk-based capital data.

The *Risk-Based Capital .PDF Filing* is the .pdf file for risk-based capital data.

The Separate Accounts Electronic Filing includes the separate accounts annual statement and investment schedule detail.

The **Separate Accounts .PDF Filing** is the .pdf file for the separate accounts annual statement and all investment schedule detail.

The **Supplemental Electronic Filing** includes all supplements due April 1, per the *Annual Statement Instructions*.

The **Supplement** .**PDF** Filing is the .pdf file for all supplemental schedules and exhibits due April 1.

The *Quarterly Electronic Filing* includes the quarterly statement data.

The *Quarterly* .*PDF Filing* is the .pdf for quarterly statement data.

The **June** .**PDF** Filing is the .pdf file for the Audited Financial Statements and Accountants Letter of Qualifications.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail. if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (EX4) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. Indiana has chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. The XXX in this column signifies Indiana has waived the paper filing of the annual statement and all supplements.

Column (5) (Due Date)

Indicates the date on which the company must file the form.

Column (6) (Form Source)

This column contains one of three words: "NAIC," "State," or "Company," If this column contains "NAIC," the company must obtain the forms from the appropriate vendor. If this column contains "State," the state will provide the forms with the filing instructions. If this column contains "Company," the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

Column (7) (Applicable Notes)

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes <u>before</u> submitting a filing.

10. Detailed filing instructions follow:

	NOTES AND INSTRUCTIONS							
A	Blank Forms & Required Filings Contact Financial Services:	Financial Services at: fnclsvcs@idoi.in.gov						
В	Electronic Submission (excludes Indiana Fee and Retaliatory Fee Statement and Premium Tax Filings)	Company Document Submission Portal link located at https://www.in.gov/idoi/2328.htm under the sections of "Filings" and "Resources" Financial Services inbox is fnclsvcs@idoi.in.gov for submission of documents not available for upload via the portal or exceeds the maximum file size of 150MB						
С	Instructions for Indiana Fee and Retaliatory Fee Statement only: Companies: Due 3/1 Consolidated (Group): Due 5/1	Bulletin 264 has been issued mandating electronic filing of the Indiana Fee and Retaliatory Fee Statements through OPTins at http://www.optins.org/getting_started.htm . Contact Information for OPTins Marketing Team to setup and account if company doesn't already have one: optinsmktg@naic.org or (816) 783-8787						
D	Instructions for Premium Tax Filings & Payments: Annual due: 3/1 (title due 3/15) Quarterly due: 4/15, 6/15, 9/15, 12/15	Bulletin 264 has been issued mandating electronic filing of quarterly and annual premium tax filings through OPTins at http://www.optins.org/getting_started.htm Contact Information for OPTins Marketing Team to setup and account if company doesn't already have one: optinsmktg@naic.org or (816) 783-8787						
Е	Delivery Instructions:	All filings must be received no later than the indicated due date. If the due date falls on a weekend or holiday, then the deadline is extended to the next business day.						

F	Late Filings:	Annual Statement: Per IC 27-1-20-21.2, a \$500 late fee may be assessed if the
1	Late 1 milgs.	Annual Statement is not received in our office on or before the indicated due
		date.
		Premium Tax: The penalty for non-filing is \$100 per day. The interest penalty
		for late filing is 1% of the payment due for each month or part of a month.
		(Penalty based on received date not postmark date)
		Audited Financial: Per IC 27-1-3.5-16, a \$50 per day fee will be assessed if
		the Audited Financial Statements are not received by June 1.
G	Signature / Notarization /	Electronic signatures and notarization are acceptable, which complies with the
	Certification	electronic transaction act (IETA) (IC 27-26-2-8-108) on Annual Statements,
		Quarterly Statements, Holding Company Registration Statement and Trusteed
		Surplus Statements. Statement shall be verified by the oaths of the president or
		a vice president and the secretary or an assistant secretary of the company, per
		IC 27-1-20-21& IC 27-13-8-1 Electronic signatures should be from a
		commercially available software, such as Docusign or Esign, are acceptable.
		"Check the Box" signatures or "Rubber Stamp" signatures Do Not Comply.
		Please be sure to include the signed jurat page within the
		Annual/Quarterly statement filing when uploading to the IDOI Document
		Submission Portal and the NAIC.
Н	Amended Filings:	Amended items must be filed within 10 days of their amendment, along with
		an explanation of the amendments. Signature requirements for the original
		filing should be followed for any amendment. An email notification will need
		to be sent to Financial Services at finclsvcs@idoi.in.gov so that filing that is
		being amended can be reset to pending for the amendment to be uploaded via
		the Document Submission Portal.
I	Exceptions from normal filings:	All exemption or extension requests for Actuarial Opinion or Consolidated
		Audited Financial filing must be submitted by December 1st. Per IC 27-1-3.5-
		6, extension request for an Audited Financial must be filed 10 days before the
		due date.
		Per IC 27-1-3.5-11 and IC 27-13-8-2(c), Notification of Adverse Financial
		Condition is due 5 business days after receipt of the accountant's report. All
		requests for exemption or extension, and the notification of adverse financial
		condition must be sent to:
		Roy Eft, Chief Financial Examiner
		Indiana Department of Insurance
		311 W. Washington St., Suite 103
		Indianapolis, IN 46204-2787
J	Bar Codes (State or NAIC)	Bar codes are no longer required.
K	NONE or N/A Filings:	
		File as "NA" if the form does not apply or as "NONE" if there is nothing to
		report. Document indicating N/A or None should be uploaded via the portal.
L	Filings new, discontinued or	Life
	modified materially since last	Clarification Request for Life PBR Exemption is not filed if applicable
	year:	In the 2022 edition of the Valuation Manual, the following instruction
		can be found in VM Section II, Subsection 1.G.1: "the filing of
		subsequent statements of exemption is not required as long as the
		company continues to qualify for the exemption."
		All statement types
		Revised Annual Company Profile Questionnaire

M	Blank State Forms:	Go to http://www.in.gov/idoi/2328.htm , in the Filings section and under the
		heading Annual/Quarterly Statements click on the appropriate statement type company will be filing.
N	Blank NAIC Forms:	http://www.naic.org/industry filing participation vendors.htm
О	Annual & Quarterly Statement and	Life & Health, Fraternal, HMO & LSHMO
	Form B & C preparation only	Amanda Denton
	contact:	at adenton@idoi.in.gov
		P&C and Title
		Pam Walters
		at pwalters@idoi.in.gov
		Cybersecurity Annual Certification of Compliance
		Jerry Ehlers
		at jehlers@idoi.in.gov
P	Exemption/Designation	
		Please refer to IC 27-1-3.5-14 for exemption or IC 27-1-3.5-8 for designation.
Q	Indiana Comprehensive Health Insurance Association Exhibit	Send electronically to <u>ICHIAsupplement@sradvise.com</u> only if company has any remaining business in the state.
	forms:	Contact for questions: Phone (317) 468-8781
		DO NOT SEND to IDOI
R	Statement of Condition (Foreign	Prepare and upload via the Document Submission Portal. Please note the
	Companies Only):	contact information at the top of the form will be used by the newspaper to
		send the invoice to the company for publishing the statement of condition.
		This filing is not applicable to foreign RRGs HMOs, LSHMOs or fraternal companies.
S	Supplemental Report #2	Complete an additional Report #2 from the NAIC blank for POS business only.
T	RBC Exemptions	If HMO/LSHMO has less than 1) 1 million in premium, or 2) 1,000 members the Company may submit a written request for exemption from RBC filing requirement by 2/1/2021.
		All requests for exemption must be sent to:
		Roy Eft, Chief Financial Examiner
		Indiana Department of Insurance
		311 W. Washington St., Suite 103
		Indianapolis, IN 46204-2787
U	CPA Qualification Letter	Item #1 on the CPA Qualification Letter should reference Indiana State Board of Accountancy in accordance with IC 27-1-3.5-12.5(1).
V	Communication of Internal	Required by 760 IAC 1-78-10; insurer shall furnish written communication as
	Control Related Matters Noted in	to any unremediated material weaknesses in its internal control over financial
	Audit	reporting noted during the audit and provide a description of remedial actions
		taken or proposed to correct unremediated material weaknesses, if the actions
***	D 1	are not described in the accountant's communication.
W	Regulatory Asset Adequacy Issues	This summary is required by 760 IAC 1-57-9(e) for all companies licensed as
	Summary	life and fraternal companies. The requirements of the filing are described in 760 IAC 1-57-9(h). Domestic Companies please email to
		fnclsvcs@idoi.in.gov with NAIC #, and name of company on the subject line.
		<u>monoroughtonini.gov</u> with trane π , and name of company on the subject line.

		In the body of the email please include a contact person, their email address and phone number. Please include summary as attachment to the email. The Department will not accept secure emails.				
		Foreign Companies shall submit to their domiciliary and shall be made available to the Indiana Department of Insurance upon request.				
X	Actuarial Opinion Summary	Required for domestic P&C companies that file a P&C blank.				
Y	Form F	A Form F is to be filed only with the Lead State Regulator of the holding company. Lead State Listing is located at http://www.naic.org/public lead state report.htm.				
Z	Annual Company Profile Questionnaire	When providing an updated profile response, please provide a red-line version showing changes from prior year. If first time filing, the questionnaire can be accessed on the IDOI website. This form has been modified for year-end 2022.				
AA	Domestic Companies	Domestic companies must make a premium tax filing only if they elect to. Please refer to IC 27-1-18-2(b) for election filing requirements. The is not applicable to HMOs and LSHMOs as they pay corporate tax versus premium tax.				
BB	Domestic and Foreign HMO & LSHMO	Only Domestic and Foreign HMOs & LSHMOs are required to file these specific items. Others mark as NONE or N/A				
CC	Year-end bond amortization	Must be filed by 2/15 for companies (including HMOs & LSHMOs) maintaining a deposit with the IDOI. The instructions are located on the Department's website at http://www.in.gov/idoi/2443.htm .				
		The Report of Securities must be received prior to the Department issuing year-end Certificates of Deposits.				
		Please contact Britney Tate with any questions at 317-232-2383 or btate@idoi.in.gov .				
DD	Health Care Exhibit Supplement Waiver	The waiver form and instructions are located on the Department's website at http://www.in.gov/idoi/2394.htm .				
EE	ORSA	Required to be filed once a year. It is the Department's preference that ORSA be filed on or before September 1.				
FF	Description of Grievance & Appeals	Email your annual report by March 1 of each calendar year to compliance@idoi.in.gov with the subject line, "Grievance/Appeals Report."				
		Please contact Rebecca Vaughan with any questions at (317) 232-2187 or rvaughan@idoi.IN.gov .				
GG	Minimum Net Worth Calculation	Only applicable to domestic and foreign HMOs and LSHMOs				

PROPERTY & CASUALTY INSURERS

COMPANY NAME:	NAIC Company Code:				
Contact:	Telephone:				
REQUIRED FILINGS IN THE STATE OF:	Filings Made During the Year 2023				

(1)	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5)	(6) FORM	(7) APPLICABLE
Checklist			Dom State		Foreign State	DUE DATE	SOURCE**	NOTES
		I. NAIC FINANCIAL STATEMENTS	State	wiic	Blate		1	
	1	Annual Statement (8 ½" x 14")	EO	EO	XXX	3/1	NAIC	A,B,E-O
	1.1	Printed Investment Schedule detail (Pages E01-E29)	ЕО	ЕО	XXX	3/1 5/15, 8/15,	NAIC	A,B,E-O
	2	Quarterly Financial Statement (8 ½" x 14")	EO	EO	XXX	11/15	NAIC	A,B,E-O
	3	Protected Cell Annual Statement	EO	0	XXX	3/1	NAIC	A,B,E-O
	4	Combined Annual Statement (8 ½" x 14")	ЕО	ЕО	XXX	5/1	NAIC	A,B,E-O
		II. NAIC SUPPLEMENTS					1	
	11	Accident & Health Policy Experience Exhibit	EO	EO	XXX	4/1	NAIC	A,B,E-K,N
	12	Actuarial Opinion	EO	EO	XXX	3/1	Company	A,B,E-K
	13 14	Actuarial Opinion Summary Bail Bond Supplement	EO EO	N/A EO	XXX	3/15 3/1	Company NAIC	A,B,E-K,X A,B,E-K,N
	15	Combined Insurance Expense Exhibit	EO	EO	XXX	5/1	NAIC	A,B,E-K,N
	16	Credit Insurance Experience Exhibit	EO	EO	XXX	4/1	NAIC	A,B,E-K, N
	17	Cybersecurity and Identity Theft Insurance Coverage Supplement	ЕО	ЕО	xxx	4/1	NAIC	A,B,E-K,N
	18	Director and Officer Insurance Coverage Supplement	EO	ЕО	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A,B,E-K,N
	19	Financial Guaranty Insurance Exhibit	ЕО	ЕО	XXX	3/1	NAIC	A,B,E-K,N
	20	Insurance Expense Exhibit Life, Health & Annuity Guaranty Association	ЕО	ЕО	XXX	4/1	NAIC	A,B,E-K,N
	21	Assessable Premium Exhibit, Parts 1 and 2	ЕО	EO	xxx	4/1	NAIC	A,B,E-K, N
	22	Long-Term Care Experience Reporting Forms	ЕО	ЕО	XXX	4/1	NAIC	A,B,E-K,N
	23	Management Discussion & Analysis	EO	EO	XXX	4/1	Company	A,B,E-K,O
	24	Medicare Part D Coverage Supplement	ЕО	ЕО	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A,B,E-K,N
	25	Medicare Supplement Insurance Experience Exhibit	EO	ЕО	XXX	3/1	NAIC	A,B,E-K,N
	26	Mortgage Guaranty Insurance Exhibit	EO	EO	XXX	4/1	NAIC	A,B,E-K,N
	27 28	Premiums Attributed to Protected Cells Exhibit Private Flood Insurance Supplement	EO EO	EO EO	XXX	3/1 4/1	NAIC NAIC	A,B,E-K,N A,B,E-K
	29	Reinsurance Attestation Supplement	EO	EO	XXX	3/1	Company	A,B,E-K
	30	Exceptions to Reinsurance Attestation Supplement	EO	N/A	XXX	3/1	Company	A,B,E-K
	31	Reinsurance Summary Supplemental	EO	EO	XXX	3/1	NAIC	A,B,E-K,N
	32	Risk-Based Capital Report Schedule SIS	EO EO	EO N/A	XXX N/A	3/1 3/1	NAIC NAIC	A,B,E-K,N A,B,E-K,N
	34	Supplement A to Schedule T	ЕО	EO	XXX	3/1, 5/15, 8/15, 11/15	NAIC	A,B,E-K,N
	35	Supplemental Compensation Exhibit	ЕО	N/A	N/A	3/1	NAIC	A,B,E-KN
	36	Supplemental Health Care Exhibit (Parts 1, 2 and 3)	EO	EO	XXX	4/1	NAIC	A,B,E-K,N
	37	Supplemental Health Care Exhibit's Allocation Report Supplement	EO	ЕО	xxx	4/1	NAIC	A,B,E-K,N
	38	Supplemental Investment Risk Interrogatories	ЕО	ЕО	XXX	4/1	NAIC	A,B,E-K,N
	39	Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts	ЕО	ЕО	xxx	3/1	NAIC	A,B,E-K, N
	40	Trusteed Surplus Statement	ЕО	ЕО	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A,B,E-K,N
						, -1, 10		
	61	III. ELECTRONIC FILING REQUIREMENTS Annual Statement Electronic Filing	****	EO	vvv	2 /1	NAIC	
	62	March .PDF Filing	XXX	EO EO	XXX	3/1 3/1	NAIC	
	63	Risk-Based Capital Electronic Filing	XXX	EO	N/A	3/1	NAIC	
-	64	Risk-Based Capital .PDF Filing	XXX	EO	N/A	3/1	NAIC	
	65 66	Combined Annual Statement Electronic Filing Combined Annual Statement .PDF Filing	XXX	EO EO	XXX XXX	5/1 5/1	NAIC NAIC	
	67	Supplemental Electronic Filing	XXX	EO	XXX	4/1	NAIC	
	68	Supplemental .PDF Filing	XXX	EO	XXX	4/1	NAIC	
	69	Quarterly Statement Electronic Filing	xxx	ЕО	xxx	5/15, 8/15, 11/15	NAIC	
	70	Quarterly .PDF Filing	xxx	ЕО	xxx	5/15, 8/15, 11/15	NAIC	
	71	June .PDF Filing	XXX	ЕО	XXX	6/1	NAIC	
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountants Letter of Qualifications	EO	EO	N/A	6/1	Company	B,E,U
	82	Audited Financial Reports	EO	EO	XXX	6/1	Company	B,E,F,I,V
	83	Audited Financial Reports Exemption Affidavit Communication of Internal Control Related Matters	EO	N/A	N/A	6/1	Company	B,E,F,I,P
	84	Noted in Audit	EO	ЕО	N/A	8/1	Company	B,E,V
	85	Independent CPA (change)	EO	N/A	N/A		Company	В,Р
	86	Management's Report of Internal Control Over Financial Reporting	EO	N/A	N/A	8/1	Company	В,Е
	87	Notification of Adverse Financial Condition	ЕО	N/A	N/A		Company	B,I
	88	Relief from the five-year rotation requirement for	EO	ЕО	XXX	3/1	Company	B,I,P
		lead audit partner Relief from the one-year cooling off period for					1 7	
	89	independent CPA	ЕО	ЕО	XXX	3/1	Company	B,I,P

(1)	(2)	(3)	(4) NUMBER OF COPIES*		(5)	(6) FORM	(7) APPLICABLE	
Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	Domestic		Foreign	DUE DATE	SOURCE**	NOTES
	0.0		State	NAIC	State	2 /1		212
	90	Relief from the Requirements for Audit Committees	EO	EO	XXX	3/1	Company	B,I,P
	91	Request to File Consolidated Audited Annual Statements	EO	N/A	N/A	12/1/15	Company	I
	92	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	ЕО	N/A	N/A		Company	B,I,P
		V. STATE REQUIRED FILINGS						
	101	Annual Company Profile Questionnaire	ЕО	0	N/A	4/1	State	B,J,L,M,O,Z
	102	Basket Clause	EO	0	0	3/1	State	B,E,J,K,M,O
	103	Certificate of Advertising	EO	0	EO	3/1	State	A,B,E,J,M
	104	Corporate Governance Annual Disclosure***	EO	0	N/A	6/1	Company	A,B,E,J, O
	105	Cybersecurity Annual Certification of Compliance	ЕО	0	N/A	4/15	Company	A, B, G, H, J, , M, O
	106	Foreign, Mtg-Backed & Asset –Backed Sec Report	EO	0	0	3/1	State	B,E,J,M,O
	107	Form F ****	EO	0	N/A	7/1	State	B,E,GJ,O,Y
	108	Health Care Exhibit Supplement Waiver	EO	0	N/A	2/15	State	I, J,DD
	109	Holding Company Registration Statement (Rule 15.1, Form B & C)	ЕО	0	N/A	7/1	State	B,E,G,J,O
	110	Jurat (Include with Annual/Quarterly Statement)	ЕО	ЕО	N/a	3/1, 5/15, 8/15, 11/15	NAIC	A,B,G,H
	111	ORSA *****	EO	0	N/A	See Note EE	Company	B,J, O,EE
	112	Premium Tax (Do Not Include with Annual Statement)	ЕО	0	ЕО	3/1,4/15,6/15 9/15,12/15	State	D,E,F
	113	State Filing Fees (Indiana Fee and Retaliatory Fee Statement) Do Not Include with Annual Statement	ЕО	0	ЕО	3/1	State	C,E
	114	Statement of Condition	0	0	EO	3/1	State	A,B,E,G,H,J,R
	115	Supplement to the State of Indiana Health Exhibit (ICHIA)	ЕО	0	ЕО	3/1	ICHIA	Q
	116	Year-End Deposit Requirements for Indiana Domestic Companies and any Foreign companies with a deposit in Indiana.	ЕО	0	ЕО	2/15	State	CC

^{*}If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. EO (electronic only filing).

^{**}If Form Source is NAIC, the form should be obtained from the appropriate vendor.

^{***}For those states that have adopted the NAIC Corporate Governance Annual Disclosure Model Act, an annual disclosure is required of all insurers or insurance groups by June 1. The Corporate Governance Annual Disclosure is a state filing only and should <u>not</u> be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state if filed at the insurance group level. For more information on lead states, see the following NAIC URL: http://www.naic.org/public_lead_state_report.htm.

^{****}For those states that have adopted the NAIC updated Holding Company Model Act, a Form F filing is required annually by holding company groups. Consistent with the Form B filing requirements, the Form F is a state filing only and should <u>not</u> be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state. For more information on lead states, see the following NAIC URL: http://www.naic.org/public_lead_state_report.htm

^{******}For those states that have adopted the NAIC Risk Management and Own Risk and Solvency Assessment Model Act, a summary report is required annually by insurers and insurance groups above a specified premium threshold. The ORSA Summary Report is a state filing only and should not be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state if filed at the insurance group level. It is the Department's preference that ORSA filing be submitted on or before September 1. For more information on lead states, see the following NAIC URL: http://www.naic.org/public_lead_state_report.htm