

LIFE, ACCIDENT AND HEALTH/FRATERNAL INSURERS

COMPANY NAME: _____ NAIC Company Code: _____

Contact: _____ Telephone: _____

REQUIRED FILINGS IN THE STATE OF: _____ Filings Made During the Year 2021

FRATERNAL COMPANIES BEGIN FILING LIFE/FRATERNAL STATEMENT EFFECTIVE WITH FIRST QUARTER, 2019.

(1) Checklist	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAIC	State			
I. NAIC FINANCIAL STATEMENTS								
	1	Annual Statement (8 1/2"x14")	KY EO	EO		3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E29)	KY EO	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	KY EO	EO		5/15, 8/15, 11/15	NAIC	
	3	Separate Accounts Annual Statement (8 1/2"x14")	KY EO	EO		3/1	NAIC	
II. NAIC SUPPLEMENTS								
	11	Accident & Health Policy Experience Exhibit	KY EO	EO		4/1	NAIC	
	12	Credit Insurance Experience Exhibit	KY EO	EO	xxx	4/1	NAIC	
	13	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit	KY EO	EO	xxx	4/1	NAIC	
	14	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit Adjustment Form	KY EO	EO	xxx	4/1	NAIC	
	15	Long-term Care Experience Reporting Forms	xxx	EO	xxx	4/1	NAIC	
	16	Management Discussion & Analysis	KY EO	EO		4/1	Company	
	17	Medicare Supplement Insurance Experience Exhibit	xxx	EO	xxx	3/1	NAIC	
	18	Medicare Part D Coverage Supplement	xxx	EO		3/1, 5/15, 8/15, 11/15	NAIC	
	19	Risk-Based Capital Report	KY EO	EO		3/1	NAIC	
	20	Schedule SIS	KY EO	N/A	N/A	3/1	NAIC	
	21	Supplemental Compensation Exhibit	KY EO	N/A	N/A	3/1	NAIC	
	22	Supplemental Health Care Exhibit (Parts 1, 2 and 3)	KY EO	EO		4/1	NAIC	
	23	Supplemental Health Care Exhibit's Allocation Report	KY EO	EO		4/1	NAIC	
	24	Supplemental Investment Risk Interrogatories	KY EO	EO		4/1	NAIC	
	25	Supplemental Schedule O		EO	xxx	3/1	NAIC	
	26	Supplemental Term and Universal Life Insurance Reinsurance Exhibit	KY EO	EO		4/1	NAIC	
	27	Trusteed Surplus Statement	KY EO	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	28	Variable Annuities Supplement	KY EO	EO		4/1	NAIC	
	29	VM 20 Reserves Supplement	KY EO	EO		3/1	NAIC	
	30	Workers' Compensation Carve-Out Supplement	KY EO	EO		3/1	NAIC	
Actuarial Related Items								
	31	Actuarial Certification regarding use 2001 Preferred Class Table	KY EO	EO		3/1	Company	
	32	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	KY EO	EO		3/1	Company	
	33	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	KY EO	N/A	xxx	4/30	Company	
	34	Actuarial Opinion	KY EO	EO		3/1	Company	

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			Domestic		Foreign			
			State	NAIC				
	35	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	KY EO	EO		3/1	Company	
	36	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	KY EO	EO		3/1	Company	
	37	Actuarial Opinion on X-Factors	KY EO	EO		3/1	Company	
	38	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	KY EO	EO		3/1	Company	
	39	Request for Life PBR Exemption (formerly Companywide Exemption)	KY EO	E/O		Commissioner 7/1 NAIC 8/15	Company	
	40	Executive Summary of the PBR Actuarial Report	KY EO	N/A		4/1	Company	
	41	Life Summary of the PBR Actuarial Report	KY EO	N/A		4/1	Company	
	42	Variable Annuities Summary of the PBR Actuarial Report	KY EO	N/A		4/1	Company	
	43	PBR Actuarial Report (provide upon request)	KY EO	N/A			Company	
	44	RAAIS required by <i>Valuation Manual</i>	KY EO	N/A	xxx	4/1	Company	
	45	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	KY EO	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	46	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	KY EO	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	47	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	KY EO	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	48	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	KY EO	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	49	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	KY EO	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	50	RBC Certification required under C-3 Phase I	KY EO	EO		3/1	Company	
	51	RBC Certification required under C-3 Phase II	KY EO	EO		3/1	Company	
	52	Statement on non-guaranteed elements - Exhibit 5 Int. #3	KY EO	EO		3/1	Company	
	53	Statement on par/non-par policies – Exhibit 5 Int. 1&2	KY EO	EO		3/1	Company	
		III. ELECTRONIC FILING REQUIREMENTS						
	61	Annual Statement Electronic Filing	xxx	EO	xxx	3/1	NAIC	
	62	March .PDF Filing	xxx	EO	xxx	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	Separate Accounts Electronic Filing	xxx	EO	xxx	3/1	NAIC	
	66	Separate Accounts .PDF Filing	xxx	EO	xxx	3/1	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	EO	xxx	5/15, 8/15, 11/15	NAIC	
	70	Quarterly .PDF Filing	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC	
	71	June .PDF Filing	xxx	EO	xxx	6/1	NAIC	
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountants Letter of Qualifications	KY EO	EO	N/A	6/1	Company	
	82	Audited Financial Reports	KY EO	EO		6/1	Company	
	83	Audited Financial Reports Exemption Affidavit	KY EO	N/A	N/A		Company	
	84	Communication of Internal Control Related Matters Noted in Audit	KY EO	EO	N/A	8/1	Company	
	85	Independent CPA (change)	KY EO	N/A	N/A		Company	

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			Domestic		Foreign			
			State	NAIC	State			
	86	Management's Report of Internal Control Over Financial Reporting	KY EO	N/A	N/A	8/1	Company	
	87	Notification of Adverse Financial Condition	KY EO	N/A	N/A		Company	
	88	Relief from the five-year rotation requirement for lead audit partner	KY EO	EO		3/1	Company	
	89	Relief from the one-year cooling off period for independent CPA	KY EO	EO		3/1	Company	
	90	Relief from the Requirements for Audit Committees	KY EO	EO		3/1	Company	
	91	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	KY EO	N/A	N/A		Company	
V. STATE REQUIRED FILINGS								
	101	Corporate Governance Annual Disclosure***	KY EO	0		8/1	Company	
	102	Filings Checklist (with Column 1 completed)		0			State	
	103	Form B-Holding Company Registration Statement	KY EO	0		4/1	Company	
	104	Form F-Enterprise Risk Report ****	KY EO	0		4/1	Company	
	105	ORSA*****	KY EO	0		8/1	Company	
	106	Premium Tax	See "D" Page 3	0	See "D" page 3	See "D" Page 3	State	
	107	State Filing Fees	KY EO	0	KY EO*	3/1	State	
	108	Signed Jurat	KY EO	0	KY EO*	3/1, 5/15, 8/15, 11/15	NAIC	*annually only for foreign companies
	109	Certificate of Deposit-Foreign ONLY	KY EO	0	KY EO*	3/1	State	
	110	Details Listing of Securities Held Under Safekeeping (Form 143)	KY EO	0	KY EO*	3/1, 5/15, 8/15, 11/15	State	*Required for foreign companies if deposit held in KY
	111	Affidavit Covering Finance Committee	KY EO	0	0	3/1	State	
	112	Schedule of Miscellaneous Investments (Form 460 and 470)	KY EO	0	0	3/1, 5/15, 8/15, 11/15	State	
	113	Reconciliation and Summary of Assets and Reserve Requirements (Form 480)	KY EO	0	0	3/1	State	
	114	Direct Business Page (State Page)	KY EO	0	0	3/1	NAIC	
	115	Direct Economic Impact of KY Captive During Current Reporting Year (Form CI-150) Captive RRGs Only	KY EO	0	0	3/1	State	
	116	Certificate of Advertising (Form 440)	KY EO	0	KY EO*	3/1	State	

*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 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. 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 not 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. For more information on lead states, see the following NAIC URL: http://www.naic.org/public_lead_state_report.htm

For Companies to Use Checklist	NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
A	Required Filings Contact Person:	Contacts:
	Kentucky Department of Insurance	Primary: Rodney Hugle & Ardena Rogers
	Financial Standards and Examination Division	<u>Rodney.Hugle@ky.gov & Ardena.Rogers@ky.gov</u>
	Mayo-Underwood Building 500 Mero Street, 2SE11 P.O. Box 517 Frankfort, KY 40601	Secondary: Victoria Lloyd <u>Victoria.Lloyd@ky.gov</u>
	Phone Number: 502-564-6082	Phone Number: 502-564-6082
	Division e-mail: <u>DOI.FinancialStandardsMail@ky.gov</u>	Division e-mail
		<u>DOI.FinancialStandardsMail@ky.gov</u>
	B	Mailing Address for KY ELECTRONIC, Hand or Overnight delivery:
(Please note our address has changed)		
Department of Insurance		Kentucky Department of Insurance
500 Mero Street 2SE11		P.O. Box 517
Frankfort, KY 40601		Frankfort, KY 40602- 0517
Attn. Financial Standards & Examination Division		Attn. Financial Standards & Examination Division
<u>KY ELECTRONIC of Annual Statement documents</u>		
<u>(http://insurance.ky.gov/). Your Annual Statement</u>		
contact person should have the appropriate “USERNAME” and “PASSWORD” to upload Annual Statements.		
<u>FOR DOMESTIC COMPANY ONLY!!!</u>		
<u>To upload their Annual Statement documents.</u>		
Division e-mail	Division e-mail	
<u>DOI.FinancialStandardsMail@ky.gov</u>	<u>DOI.FinancialStandardsMail@ky.gov</u>	
	Mailing Address for Filing Fees: RENEWAL FEES PAID ONLINE	
C		Renewal fees paid online.
	To pay online, click on Eservices on the DOI website	Other fees mailed to the address above.
	<u>(http://insurance.ky.gov/). Your Annual Statement</u>	
	contact person should have the appropriate “USERNAME” and “PASSWORD” to process the payment.	

	Mailing Address for Premium Tax Payments: (see below)	
D		<u>Post Office Box:</u>
	Premium tax forms can be accessed on the Dept. of Revenue's website (http://revenue.ky.gov/forms)	Department of Revenue
	<i>Click on "Current Year Forms."</i>	P.O. Box 1303
		Frankfort, KY 40602-1303
		OR
		<u>Physical Address:</u>
	NOTE: Please DO NOT Submit PREMIUM TAX payments to the KY Department of Insurance.	Department of Revenue
		501 High Street
		Frankfort, KY 40601
<u>Phone Number: 502-564-4810</u>		
E	Delivery Instructions: PAY ATTENTION TO YOUR DEADLINES Late Filings: FINES FOR LATE FILINGS	ALL filings must be postmarked no later than the indicated due date, regardless of the due date falling on a weekend or holiday.
F	Late Filings: FINES FOR LATE FILINGS Original Signatures: REQUIRED FOR DOMESTIC COMPANIES	Companies will be fined \$100 per day for ALL late filings, even in situations where a request for extension has been received in writing and approved. For all late filings received WITHOUT extension approval, and additional civil penalty of \$1,000 may be assessed.
G	Original Signatures: REQUIRED FOR DOMESTIC COMPANIES Signature/Notarization/Certification: REQUIRED BY KENTUCKY STATUTE	Original signatures are required on ALL filings from domestic companies.
		Foreign companies should follow the NAIC Annual Statement Instructions regarding signatures.
H	Signature/Notarization/Certification: REQUIRED BY KENTUCKY STATUTE Amended Filings: APPLIES TO DOMESTIC COMPANIES ONLY	Per KRS 304.3-240(1)-shall be verified by oaths of a least two (2) of the insurers' principal officers.
I	Amended Filings: APPLIES TO DOMESTIC COMPANIES ONLY Exceptions from normal filings:	For domestic companies, amended items must be filed within ten (10) days of the amendment, along with an explanation of the amendment. Same applies for original filings where signatures are required.
J	Exceptions from normal filings: Bar Codes (State or NAIC):	Domestic companies should apply for an exemption or extension at least thirty (30) days prior to the filing due date.
		Foreign companies MUST supply a written copy of any exemption or extension, received by their state of domicile, at least ten (10) days prior to their filing due date to receive approval of an exemption or

		extension from the Kentucky Department of Insurance.
K	REFER TO http://insurance.ky.gov/	Please follow the NAIC Annual Statement Instructions provided on the Kentucky Department of Insurance website.
L	Signed Jurat: NONE Filings:	Kentucky REQUIRES Foreign companies to file a copy of a Signed Jurat Page by March 1 as part of their Annual Statement Filings.
M	REFER TO http://insurance.ky.gov/	Please follow the NAIC Annual Statement Instructions provided on the Kentucky Department of Insurance website.
	Filings new, discontinued or modified materially since last year:	
N	Filings new, discontinued or modified materially since last year: Notification of Adverse Financial Condition	For ALL companies , please see “Note P” and “Note Q” below. Domestic, please refer to “Note R.”
O	Notification of Adverse Financial Condition Kentucky Annual Filing Instructions:	Notice of Adverse Financial Condition is due five (5) business days after receipt of the accountant’s report and must be sent to the Kentucky Department of Insurance Early Warning Analyst (EWA):
		Russell Coy, EWA
		Kentucky Department of Insurance
		P.O. Box 517
		Frankfort, KY 40602-0517
		Email: Russell.Coy@ky.gov
P	REFER TO http://insurance.ky.gov/	For additional instructions, please see the attached Kentucky Annual Filing Instructions listed on the Kentucky Department of Insurance website. The instructions should appear directly above the NAIC checklists provided for each type of entity.
	Company’s Responsibility to Review/Update their Information on	
Q	Kentucky Department of Insurance website:	All companies should refer to the Kentucky Department of Insurance website under “Company Info” to review and verify their company information. If corrections or updates need to be made, companies should notify the Kentucky Department of Insurance by submitting the appropriate

		form(s) on the NAIC UCAA Corporation Amendments Application.
		All companies should refer to the Kentucky Department of Insurance website under “ <i>Company Info</i> ” to review and verify their company information. If corrections or updates need to be made, companies should notify the Kentucky Department of Insurance by submitting the appropriate form(s) on the NAIC UCAA Corporation Amendments Application.
	<u>Website address http://insurance.ky.gov/</u>	All companies should refer to the Kentucky Department of Insurance website under “ <i>Company Info</i> ” to review and verify their company information. If corrections or updates need to be made, companies should notify the Kentucky Department of Insurance by submitting the appropriate form(s) on the NAIC UCAA Corporation Amendments Application.
		Please be advised:
		*the Form 12 – deals with changes to the Service of Process
		*the Form 14 – deals with address changes
	Actuarial Opinion Summary: REQUIRED FROM DOMESTICS	*Biographical affidavits
R	Direct Economic Impact of Kentucky Captive During Current Reporting Year (Form CI-150): FOR “DOMESTIC” RISK RETENTION GROUPS ONLY	should ONLY be submitted for NEW Presidents
S		
		All domestic companies are required to file the Actuarial Opinion Summary. Only one (1) copy of the summary is needed and stamp the envelope “confidential.”
		Note S pertains to domestic risk retention groups.

**General Instructions
For Companies to Use Checklist**

Please Note: This state’s instructions for companies to file with the NAIC are included in this Checklist. The NAIC will not be sending their own checklist this year.

Electronic filing is intended to be filing(s) submitted to the NAIC via the NAIC Internet Filing Site which eliminates the need for a company to submit diskettes or CD-ROM to the NAIC. Companies are not required to file hard copy filings with the NAIC.

Column (1) Checklist

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an “x” in this column when submitting information to the state.

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.

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 (EX) 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 (EX) Task Force. XXX appears in the “Number of Copies” “Foreign” column for the appropriate schedules and exhibits. **Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state 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 before submitting a filing.

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