LIFE, ACCIDENT AND HEALTH/FRATERNAL INSURERS

COMPANY NAME:____ **NAIC Company Code:**______________________________

Contact:____ **Telephone:** _______________________________________

REQUIRED FILINGS IN THE STATE OF: ____________________________ **Filings Made During the Year 2026**

(1) Checklist	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES* Domestic		Foreign	(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
			State	NAIC	State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 ½”x14”)	EO	EO	xxx	3/1	NAIC	B, F, G
	1.1	Printed Investment Schedule detail (Pages E01-E29)	EO	EO	xxx	3/1	NAIC	B
	2	Quarterly Financial Statement (8 ½” x 14”)	EO	EO	xxx	5/15, 8/15, 11/15	NAIC	B, G
	3	Separate Accounts Annual Statement (8 ½”x14”)	EO	EO	xxx	3/1	NAIC	B
		II. NAIC SUPPLEMENTS						
	11	Accident & Health Policy Experience Exhibit	EO	EO	xxx	4/1	NAIC	B
	12	Credit Insurance Experience Exhibit	EO	EO	xxx	4/1	NAIC	B
	13	Health Supplement	EO	EO	xxx	3/1	NAIC	B
	14	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit, Parts 1 and 2	EO	EO	xxx	4/1	NAIC	B
	15	Long-term Care Experience Reporting Forms	EO	EO	xxx	4/1	NAIC	B
	16	Management Discussion & Analysis	EO	EO	xxx	4/1	Company	B
	17	Market Conduct Annual Statement Premium Exhibit for Year	EO	EO	xxx	3/1	NAIC	B
	18	Medicare Supplement Insurance Experience Exhibit	EO	EO	xxx	3/1	NAIC	B
	19	Medicare Part D Coverage Supplement	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	B
	20	Risk-Based Capital Report	EO	EO	xxx	3/1	NAIC	B, G, H
	21	Schedule SIS	EO	N/A	N/A	3/1	NAIC	B
	22	Supplemental Compensation Exhibit	EO	N/A	EO	3/1	NAIC	E, F, M
	23	Supplemental Health Care Exhibit (Parts 1 and 2)	EO	EO	xxx	4/1	NAIC	B
	24	Supplemental Investment Risk Interrogatories	EO	EO	xxx	4/1	NAIC	B
	25	Supplemental Schedule O	EO	EO	xxx	3/1	NAIC	B
	26	Supplemental Term and Universal Life Insurance Reinsurance Exhibit	EO	EO	xxx	4/1	NAIC	B, Z
	27	Trusteed Surplus Statement	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	B
	28	Variable Annuities Supplement	EO	EO	xxx	4/1	NAIC	B
	29	VM 20 Reserves Supplement	EO	EO	xxx	3/1	NAIC	B
	30	Workers’ Compensation Carve-Out Supplement	EO	EO	xxx	3/1	NAIC	B
		Actuarial Related Items						
	31	Actuarial Certification regarding use 2001 Preferred Class Table	EO	EO	xxx	3/1	Company	B
	32	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	0	EO	0	3/1	Company	P
	33	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	EO	N/A	xxx	4/30	Company	B, EE
	34	Actuarial Opinion	EO	EO	xxx	3/1	Company	B
	35	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	EO	EO	xxx	3/1	Company	B
	36	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	EO	EO	0	3/1	Company	B, Q
	37	Actuarial Opinion on X-Factors	EO	EO	0	3/1	Company	B, Q
	38	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	0	EO	xxx	3/1	Company	T
	39	Request for Life PBR Exemption (if applicable)	0	EO	xxx	Commissioner 7/1 NAIC 8/15	Company	DD
	40	Executive Summary of the PBR Actuarial Report	EO	N/A	xxx	4/1	Company	B, FF
	41	Life Summary of the PBR Actuarial Report	EO	N/A	xxx	4/1	Company	B, FF
	42	Variable Annuities Summary of the PBR Actuarial Report	EO	N/A	xxx	4/1	Company	B, FF
	43	PBR Actuarial Report (provide upon request)	EO	N/A	xxx		Company	B, FF
	44	RAAIS required by *Valuation Manual*	EO	N/A	xxx	4/1	Company	B, G, Y

(1) Checklist	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES* Domestic State	NAIC	Foreign State	(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
	45	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	EO	EO	xxx	3/1,5/15, 8/15, 11/15	Company	B
	46	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	EO	EO	xxx	3/1,5/15, 8/15, 11/15	Company	B
	47	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	EO	EO	xxx	3/1,5/15, 8/15, 11/15	Company	B
	48	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	EO	EO	xxx	3/1,5/15, 8/15, 11/15	Company	B
	49	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	EO	EO	xxx	3/1,5/15, 8/15, 11/15	Company	B
	50	RBC Certification required under C-3 Phase I	EO	EO	xxx	3/1	Company	B
	51	RBC Certification required under C-3 Phase II	EO	EO	xxx	3/1	Company	B
	52	Statement on non-guaranteed elements - Exhibit 5 Int. #3	EO	EO	xxx	3/1	Company	B
	53	Statement on par/non-par policies – Exhibit 5 Int. 1&2	EO	EO	xxx	3/1	Company	B
		III. ELECTRONIC FILING REQUIREMENTS						
	61	Annual Statement Electronic Filing	EO	EO	xxx	3/1	NAIC	B
	62	March .PDF Filing	EO	EO	xxx	3/1	NAIC	B
	63	Risk-Based Capital Electronic Filing	EO	EO	N/A	3/1	NAIC	B
	64	Risk-Based Capital .PDF Filing	EO	EO	N/A	3/1	NAIC	B
	65	Separate Accounts Electronic Filing	EO	EO	xxx	3/1	NAIC	B
	66	Separate Accounts .PDF Filing	EO	EO	xxx	3/1	NAIC	B
	67	Supplemental Electronic Filing	EO	EO	xxx	4/1	NAIC	B
	68	Supplemental .PDF Filing	EO	EO	xxx	4/1	NAIC	B
	69	Quarterly Statement Electronic Filing	EO	EO	xxx	5/15, 8/15, 11/15	NAIC	B
	70	Quarterly .PDF Filing	EO	EO	xxx	5/15, 8/15, 11/15	NAIC	B
	71	June .PDF Filing	EO	EO	xxx	6/1	NAIC	B
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountants Letter of Qualifications	EO	EO	N/A	6/1	Company	B
	82	Audited Financial Reports	EO	EO	xxx	6/1	Company	B, U
	83	Audited Financial Reports Exemption Affidavit	EO	N/A	N/A		Company	B
	84	Communication of Internal Control Related Matters Noted in Audit	EO	EO	N/A	8/1	Company	B
	85	Independent CPA (change)	EO	N/A	N/A		Company	B, U
	86	Management's Report of Internal Control Over Financial Reporting	EO	N/A	N/A	8/1	Company	B
	87	Notification of Adverse Financial Condition	EO	N/A	N/A		Company	B
	88	Relief from the five-year rotation requirement for lead audit partner	EO	EO	xxx	3/1	Company	B
	89	Relief from the one-year cooling off period for independent CPA	EO	EO	xxx	3/1	Company	B
	90	Relief from the Requirements for Audit Committees	EO	EO	xxx	3/1	Company	B
	91	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	EO	N/A	N/A		Company	B
		V. STATE REQUIRED FILINGS						
	101	Corporate Governance Annual Disclosure***	EO	0	xxx	6/1	Company	B, CC
	102	Filings Checklist (with Column 1 completed)	0	0	0		State	
	103	Form B-Holding Company Registration Statement	EO	0	xxx	5/1	Company	B, X
	104	Form F-Enterprise Risk Report ****	EO	0	xxx	5/1	Company	B, X
	105	ORSA*****	EO	0	xxx	Annually	Company	B, BB
	106	Premium Tax	EO	0	EO	3/1	State	A, D, F
	107	State Filing Fees Life Co **- $400, Fraternal Co - $200**	$400	0	$400		State	A, C
	108	Signed Jurat	EO	0	xxx		NAIC	B, L
	109	Group Capital Calculation **(File with lead state only)**	EO	0	xxx	5/1	NAIC	B, G, H, X
	110	Annual Statement Page 24, Direct Business Page for NE	EO	0	EO	3/1	NAIC	V
	111	Annual Statement Schedule T Page (Page 49-50)	EO	0	EO	3/1	NAIC	V
	112	Comprehensive Health Insurance Pool (CHIP form)	0	0	0			AA
	113	Fraud Contact Form	EO	0	EO	3/1	State	W

(1) Checklist	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES* Domestic State	 Domestic NAIC	 Foreign State	(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
	114	Quarterly Premium Tax Return	EO	0	EO	4/15, 6/15, 9/15	State	A, D, F
	115	NE Small Employer Health Reinsurance Program Form	0	0	0			AA

***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 <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

		NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
	A	Required Filings Contact Person:	Annual Statement & Related Supplemental Filings Contact: Tadd Wegner, Chief Financial Regulator (402) 471-4734 and/or Tadd.Wegner@nebraska.gov Premium Tax Contact: Kristy Hadden, (402) 471-0373 and/or Kristy.Hadden@nebraska.gov
	B	Submission Requirements and Mailing Address:	**Submission Requirements:** All statutory filings, exhibits and statements, unless otherwise indicated (i.e. filed electronically with the NAIC), must be filed through the Nebraska DOI secure electronic portal at https://ne.accessgov.com/doi/Forms/Page/doi/nebraska-online-filing-portal/0. **Overnight Mail**: Use street address Nebraska Department of Insurance 1526 K Street, Suite 200 Lincoln, NE 68508 **Postal Service Address**: P.O. Box 95087 Lincoln, NE 68509-5087
	C	Filing Fees:	Filing fees are retaliatory and collected on the premium tax return.
	D	Premium Tax Payments:	OPTins is the **required** method for filing premium taxes. Premium tax filing information can be found at https://doi.nebraska.gov/insurers/annual-filing-requirements-premium-taxes-and-fees
	E	Delivery Instructions:	All filings must be received electronically by the Department 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:	• Insurers who fail to pay any premium or retaliatory tax when due shall pay an interest rate of 8%. • A forfeiture of $100 per day will be imposed for any late filing of the Annual Statement, Supplemental Compensation Exhibit, and/or other supplemental filings. In addition, the Director may suspend or refuse to renew the company's certificate of authority until such filings have been received.
	G	Original Signatures:	Electronic signatures or copies of signatures are acceptable, with the exception of notary signatures. (See Note H)
	H	Signature/Notarization/Certification:	Most corporate records (Articles of Incorporation and By-laws) identify the Executive Corporate Officers. In most cases, this consists of the President,

			Treasurer and Secretary. The corporate records give the authority to these Executive Officers to operate the company and will define their duties, functions, responsibilities, and/or obligations as well. The Jurat Page should reflect these Executive Officers. Since the Executive Officers are given the authority under corporate records, they should sign the Jurat Page of the statement. The Annual Statement instructions require that if these Officers are incapacitated or not available due to a personal emergency, the company should then contact the Department of Insurance for direction as to who should sign the Jurat Page. RBC Jurat Page must contain the same signatures as found on the Annual Statement Jurat Page.
	I	Amended Filings:	Insurers must file amended items within 10 days of their amendment, along with an explanation of the amendments. If there are signature requirements for the original filing, the same should be followed for any amendment.
	J	Exceptions from normal filings:	Extensions (not to exceed thirty days) for financial filings may be granted for good and sufficient cause. See Neb.Rev.Stat. §44-322. Requests should be sent to: Tadd Wegner, Chief Financial Regulator via email at Tadd.Wegner@nebraska.gov.
	K	Bar Codes (State or NAIC):	NAIC bar codes must be placed on all filings. Please follow the instructions in the NAIC Annual Statement Instructions.
	L	Signed Jurat:	See Note H
	M	NONE Filings:	See Annual Statement Instructions
	N	Filings new, discontinued or modified materially since last year:	N/A
	O	Supplemental Compensation Exhibit:	The Supplemental Compensation Exhibit is a mandatory filing for all companies licensed in Nebraska, both foreign and domestic companies. See Neb.Rev.Stat. §44-322. Refer to instructions at https://doi.nebraska.gov/insurers/annual-filing-requirements-premium-taxes-and-fees. NAIC Annual Statement Instructions include the proper format. A separate electronic filing for each legal entity in PDF format should be submitted to the filing PORTAL AT https://ne.accessgov.com/doi/Forms/Page/doi/nebraska-online-filing-portal/0 Submissions will also be accepted via email at Doi.CompExhibit@nebraska.gov. The Company Name & NAIC number should be in the subject line. **Note: When preparing a "NONE" filing, i.e. stating no salaries were paid, Part 1-questions 1-3 must be completed and

			"NONE" marked in Parts 2, 3, & 4. The Company Name and NAIC number is to be at the top of the exhibit. Please see website.
	P	Actuarial Certification Related Annuity Non-forfeiture Ongoing Compliance for Equity Indexed Annuities:	Nebraska has not adopted Model Regulation 806 and does not require an actuarial certification regarding compliance of equity-indexed annuities.
	Q	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit:	Provide opinion for each Funding Agreement.
	R	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	NE Title 210, Chapter 80, Synthetic Guaranteed Investment Contracts. Nebraska does not require the opinion to be separate from the entire entity opinion.
	S	Actuarial Opinion for Interest Indexed Universal Life:	See Chapter 40, Section 010.02 of the Nebraska Department Insurance Regulations.
	T	Actuarial Opinion Required by Modified Guaranteed Annuity Model Regulation:	Nebraska has not adopted Model Regulation 255 and does not require an actuarial opinion regarding Modified Guaranteed Annuities.
	U	Audited Financial Reports:	**Line 82**: §005.06 requires the Annual Audited Financial Report to include a reconciliation if there are differences between the audited statutory financial statements and the annual statement filed pursuant to NEB.REV.STAT. §44-322, "NE Title 210, Chapter 56." The Department will consider the filing incomplete if there are differences and a reconciliation and description are not included or is inadequate. The reconciliation and descriptions need to make "all" changes fully and clearly understandable as to why the change was made and by what amount "each" line item was changed. This requirement applies to changes to both current year and prior year amounts. In addition, the Department will expect correspondence from the Company disclosing whether they intend to amend the Annual Statement to agree with the audited changes. **Line 85**: Designation & awareness letter only applicable when first subject to the Rule or if there is a change in Independent CPA. Section 006.03 requires notification within 5 days if independent CPA has been dismissed or resigns. A separate letter within 10 days should disclose any disagreements, followed by a response from the former independent CPA whether they agree. "NE Title 210, Chapter 56, Section ###". **Line 86**: "Management's Report of Internal Control Over Financial Reporting" is required to be filed from insurers with annual direct written and assumed premiums ≥ $500 million, excluding reinsured crop and flood. This

			requirement may be satisfied by filing a SEC Section 404 Report plus an addendum, as explained in Section 016.03. Insurers in any RBC level event or in a hazardous condition may also be required to file. See “NE Title 210, Chapter 56, Section ###”.
	V	Direct Business Page and Schedule T:	A copy of the Direct Business Page and Schedule T should be submitted with premium tax. No additional filing is required.
	W	Fraud Contact Form:	Form can be found at https://doi.nebraska.gov/insurers/annual-filing-requirements-premium-taxes-and-fees Email to DOI.FraudPrevention@nebraska.gov
	X	Holding Company Filings:	**Form A:** Send electronic copy in PDF format to Tadd Wegner at Tadd.Wegner@nebraska.gov. **Forms B, C, D, & F**: Submit via electronic portal in PDF format. *Note: Forms B, C & F are required annually on May 1st. Consistent with the Form B & C filing requirements, the Form F is a state filing only and should not be submitted by the company to the NAIC. See Form F Implementation Guide for Instructions. *Note: this filing is intended to be submitted to the lead state. For more information on lead states, see the following from the NAIC—URL:http://www.naic.org/public_lead_state_report.htm **Group Capital Calculation (GCC):** Submit the GCC Excel document and signed attestation page via electronic portal. *Note the GCC is required annually on May 1st. The GCC template along with the Group Capital Calculation Instructions are available on theNAIC website. *Note: this filing is intended to be submitted to the lead state. For more information on lead states, see the following from the NAIC—URL:http://www.naic.org/public_lead_state_report.htm **Dividend Notices**: Submit via electronic portal in PDF format.
	Y	Regulatory Asset Adequacy Issues Summary:	Refer to VM-30 for RAAIS requirements. Submit electronic copy via electronic portal.
	Z	Supplemental XXX/AXXX Reinsurance Exhibit:	See NAIC Annual Statement Instructions.
	AA	Comprehensive Health Insurance Pool (CHIP form) & NE Small Employer Health Reinsurance Program Form:	These filings are no longer required.
	BB	Own Risk and Solvency Assessment (ORSA):	See ORSA Guidance Manual for instructions. The document is submitted to the lead state only of the group, not the

			NAIC or each domestic. Filing is due annually NEB.REV.STAT. § 44-9006 & 44-9007. For more information on lead states, see the following from the NAIC at http://www.naic.org/public_lead_state_report.htm. Submit copy in PDF format via electronic portal.
	CC	Corporate Governance Annual Disclosure	See Neb. Rev. Stat. 44-9101 to 44-9109 and NE Title 210, Chapter 88. The document is submitted to the lead state only of the group, not the NAIC or each domestic. For more information on lead states, see the following from the NAIC at http://www.naic.org/public_lead_state_report.htm. Submit in PDF format via electronic portal.
	DD	Life PBR Exemption (formerly Companywide Exemption):	Request for Life PBR Exemption: Any domestic company wanting to exempt ordinary life insurance policies issued directly or assumed during 2026 from the requirements of VM-20 and meeting all of the conditions specified in Section II, Subsection 1.G of the Valuation Manual must file a LIFE PBR EXEMPTION statement NO LATER THAN JULY 1, 2026. The statement of exemption must be prepared in accordance with Section II, Subsection 1.G of the 2026 Valuation Manual and must also be included with the NAIC filing for the second quarter of 2026. The Director may reject such statement prior to September 1, 2026, and require the company to follow the requirements of VM-20. There is no Nebraska specific form for this filing. Compliance with this instruction is assumed to meet the requirements of the Nebraska filing checklist.
	EE	Actuarial Guideline 51:	AG 51 Actuarial Memorandum and all supporting documents should be submitted via department electronic portal.
	FF	PBR Actuarial Reports and Certifications:	Please include all items required in VM-31. Submit via Department electronic portal.

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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