

LIFE, ACCIDENT AND HEALTH/**FRATERNAL** INSURERS

COMPANY NAME: _____ NAIC Company Code: _____

Contact: _____ Telephone: _____

REQUIRED FILINGS IN THE STATE OF: _____ Filings Made During the Year 2019

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")	1	EO	xxx	3/1	NAIC	F,G
	1.1	Printed Investment Schedule detail (Pages E01-E27)	1	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	1	EO	xxx	5/15, 8/15, 11/15	NAIC	G
	3	Separate Accounts Annual Statement (8 1/2"x14")	1	EO	xxx	3/1	NAIC	
II. NAIC SUPPLEMENTS								
	11	Accident & Health Policy Experience Exhibit	1	EO	xxx	4/1	NAIC	
	12	Analysis of Annuity Operations by Lines of Business	1	EO	xxx	4/1	NAIC	
	13	Analysis of Increase in Annuity Reserves During Year	1	EO	xxx	4/1	NAIC	
	14	Credit Insurance Experience Exhibit	1	EO	xxx	4/1	NAIC	
	15	Interest Sensitive Life Insurance Products Report	1	EO	xxx	4/1	NAIC	
	16	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit	1	EO	xxx	4/1	NAIC	
	17	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit Adjustment Form	1	EO	xxx	4/1	NAIC	
	18	Long-term Care Experience Reporting Forms	1	EO	xxx	4/1	NAIC	
	19	Management Discussion & Analysis	1	EO	xxx	4/1	Company	
	20	Medicare Supplement Insurance Experience Exhibit	1	EO	xxx	3/1	NAIC	
	21	Medicare Part D Coverage Supplement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	22	Risk-Based Capital Report	1	EO	xxx	3/1	NAIC	G,H
	23	Schedule SIS	1	N/A	N/A	3/1	NAIC	
	24	Supplemental Compensation Exhibit	1	N/A	1	3/1	NAIC	F,M,O
	25	Supplemental Health Care Exhibit (Parts 1, 2 and 3)	1	EO	xxx	4/1	NAIC	
	26	Supplemental Health Care Exhibit's Allocation Report	1	EO	xxx	4/1	NAIC	
	27	Supplemental Investment Risk Interrogatories	1	EO	xxx	4/1	NAIC	
	28	Supplemental Schedule O	1	EO	xxx	3/1	NAIC	
	29	Supplemental Term and Universal Life Insurance Reinsurance Exhibit	1	EO	xxx	4/1	NAIC	Z
	30	Trusteed Surplus Statement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	31	Variable Annuities Supplement	1	EO	xxx	4/1	NAIC	
	32	VM 20 Reserves Supplement	1	EO	xxx	3/1	NAIC	
	33	Workers' Compensation Carve-Out Supplement	1	EO	xxx	3/1	NAIC	
Actuarial Related Items								
	34	Actuarial Certification regarding use 2001 Preferred Class Table	1	EO	xxx	3/1	Company	
	35	Actuarial Certification Related Annuity Non-forfeiture Ongoing Compliance for Equity Indexed Annuities	0	EO	0	3/1	Company	P
	36	Actuarial Certification Related to Hedging required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	
	37	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	
	38	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	1	N/A	xxx	4/30	Company	
	39	Actuarial Opinion	1	EO	xxx	3/1	Company	
	40	Executive Summary of the PBR Actuarial Report (if VM early adopted)	1	N/A	xxx	4/1	Company	
	41	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	1	EO	xxx	3/1	Company	Q
	42	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	0	EO	0	3/1	Company	R
	43	Actuarial Opinion on X-Factors	1	EO	xxx	3/1	Company	
	44	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	0	EO	0	3/1	Company	T

(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			
	45	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	1	EO	Xxx	3/1	Company	
	46	Life PBR Exemption (formerly Companywide Exemption)	0	E/O	xxx	Commissioner 7/1 NAIC 8/15	Company	DD
	47	Management Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	
	48	RAAIS required by <i>Valuation Manual</i>	1	N/A	xxx	4/1	Company	G,Y
	49	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	50	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	51	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	1	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	52	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	1	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	53	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	1	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	54	RBC Certification required under C-3 Phase I	1	EO	xxx	3/1	Company	
	55	RBC Certification required under C-3 Phase II	1	EO	xxx	3/1	Company	
	56	Statement on non-guaranteed elements - Exhibit 5 Int. #3	1	EO	xxx	3/1	Company	
	57	Statement on par/non-par policies – Exhibit 5 Int. 1&2	1	EO	xxx	3/1	Company	
	58	Actuarial Memorandum Supporting Actuarial Guideline 51 Testing	1	N/A	xxx	4/1	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	1	EO	N/A	6/1	Company	
	82	Audited Financial Reports	1	EO	xxx	6/1	Company	U
	83	Audited Financial Reports Exemption Affidavit	0	N/A	N/A		Company	
	84	Communication of Internal Control Related Matters Noted in Audit	1	EO	N/A	8/1	Company	
	85	Independent CPA (change)	1	N/A	N/A		Company	U
	86	Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	U
	87	Notification of Adverse Financial Condition	1	N/A	N/A		Company	
	88	Relief from the five-year rotation requirement for lead audit partner	1	EO	xxx	3/1	Company	
	89	Relief from the one-year cooling off period for independent CPA	1	EO	xxx	3/1	Company	
	90	Relief from the Requirements for Audit Committees	1	EO	xxx	3/1	Company	
	91	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A		Company	
		V. STATE REQUIRED FILINGS						
	101	Corporate Governance Annual Disclosure***	2	0	xxx	6/1	Company	CC
	102	Filings Checklist (with Column 1 completed)	0	0	0	xxx	State	
	103	Form B-Holding Company Registration Statement	2	N/A	N/A	5/1	Company	X
	104	Form F-Enterprise Risk Report ****	2	N/A	xxx	5/1	Company	X
	105	ORSA*****	2	0	xxx	Annually	Company	BB
	106	Premium Tax	1	0	1	3/1	State	A-H

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			Domestic		Foreign			
			State	NAIC	State			
	107	State Filing Fees	\$400	0	\$400	3/1	State	C
	108	Signed Jurat	xxx	0	xxx	3/1	NAIC	L
	112	Statement of Actuarial Opinion for Interest Indexed Universal Life	1	0	xxx	3/1	Company	S
	113	Annual Statement Page 24, Direct Business Page for NE	1	0	1	3/1	NAIC	V
	114	Annual Statement Schedule T Page (Page 49-50)	1	0	1	3/1	NAIC	V
	115	Comprehensive Health Insurance Pool	1	0	1	4/1	State	AA
	116	Fraud Contact Form	1	0	1	3/1	State	W
	117	Quarterly Premium Tax Return	1	0	1	4/15, 6/15, 9/15	State	D,F

*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

NOTES AND INSTRUCTIONS (A-FF APPLY TO ALL FILINGS)		
A	Required Filings Contact Person:	<p>Annual Statement & Related Supplemental Filings Contact: Justin Schrader, Chief Financial Examiner, (402) 471-4734 or Justin.Schrader@nebraska.gov</p> <p>Premium Tax Contact: Martha Hettenbaugh, (402) 471-4671 or Martha.Hettenbaugh@nebraska.gov</p>
B	Mailing Address:	<p>Overnight Mail: Use street address Nebraska Department of Insurance 1135 M Street, Suite 300 Lincoln, NE 68508</p> <p>Postal Service Address: Nebraska Department of Insurance PO Box 82089 Lincoln, NE 68508</p>
C	Mailing Address for Filing Fees:	See Note B See Premium Tax Return for additional fees.
D	Mailing Address for Premium Tax Payments:	OPTins is the preferred method for filing premium taxes. Instructions can be found at optins.org. If you are not filing electronically through OPTins, the Department will continue to accept filings and payment at the above mailing address (See Note B) for the 2018 year.
E	Delivery Instructions:	All filings must be physically received 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 3%. 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:	Original signatures are required on all filings from domestic companies. Signatures should be in a color ink that can easily be determined to be an original and not a copy.
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/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 Justin Schrader, Chief Financial Examiner at (402) 471-4734 or via email to Justin.Schrader@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 NAIC 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 both foreign and domestic companies. <i>See Neb.Rev.Stat. §44-322. See NAIC Annual Statement Instructions, which include the proper format. There should be a separate filing for each entity.</i> Send electronic copy in PDF format to: DOI.CompExhibit@Nebraska.gov with the Company Name & NAIC number in the subject line or a hard copy (not both) mailed to: Justin Schrader, Chief Financial Examiner in a separate envelope. Notes: When preparing a “NONE” filing, stating no salaries were paid, Part 1 – Interrogatories” questions 1-3 must be completed and “NONE” marked in Parts 2, 3, & 4. Please put your Company Name and NAIC number at the top of the exhibit.
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		See Accounting and Procedures Manual Appendix A-200
R	Actuarial Opinion on Synthetic Guaranteed Investment Contracts		NE Title 210, Chapter 80, Synthetic Guaranteed Investment Contracts does not require an actuarial 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		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, Section ###”. 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

		<p>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.</p> <p>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 is 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 ###".</p> <p>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 ###".</p>
V	Direct Business Page and Schedule T:	Nebraska requires one copy of the Direct Business Page for NE, and one copy of Schedule T be submitted with the premium tax filing via either paper or electronic.
W	Fraud Contact Form:	<p>The PDF form is located at https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/ContactForm.pdf</p> <p>The form can be submitted in hard copy with the premium tax forms, faxed to 402-471-8335, or e-mailed to DOI.FraudPrevention@nebraska.gov.</p>
X	Holding Company Filings:	<p>Form A: Send electronic copy in PDF format to Matt.Holman@nebraska.gov, followed by two (2) hard copies mailed to Matt Holman (See Note B).</p> <p>Forms B, C, D, & F: Send electronic copy in PDF format to: DOI.HoldingCompany@Nebraska.gov, followed by one (1) hard copy mailed to Jill Gleason (See Note B).</p> <p>*Notes- 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</p>
		Dividend Notices: Send electronic notice in PDF format to: DOI.HoldingCompany@Nebraska.gov followed by one (1) hard copy mailed to Dave Clayton (See Note B).
Y	Regulatory Asset Adequacy Issues Summary:	Prior to Year-End 2017, RAAIS was required by NE. Title 210, Chapter 69, Section 007.01 (E). Year-end 2017 and later, refer to VM-30. Send hard copy mailed to the Chief Actuary, Rhonda Ahrens (See Note B).
Z	Supplemental XXX/AXXX Reinsurance Exhibit	See NAIC Annual Statement Instructions.
AA	Comprehensive Health Insurance Pool	Only insurers that write health insurance need to file this form. Insurers that write only property and casualty insurance do not

			<p>need to file this form. The form and instructions can be found on the DOI Website at: https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Chip2017.pdf Return completed form to the mailing address (See Note B).</p>
	BB	Own Risk and Solvency Assessment (ORSA)	<p>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 URL:http://www.naic.org/public_lead_state_report.htm Send electronic copy in PDF format to DOI.HoldingCompany@Nebraska.gov followed by one (1) hard copy mailed to Dave Clayton (See Note B).</p>
	CC	Corporate Governance Annual Disclosure	<p>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 URL:http://www.naic.org/public_lead_state_report.htm Send electronic copy in PDF format to DOI.HoldingCompany@Nebraska.gov followed by one (1) hard copy mailed to Dave Clayton (See Note B).</p>
	DD	Life PBR Exemption (formerly Companywide Exemption)	<p>Not required or recommended until year-end 2020. Must be submitted by 7/1/2019 for year-end 2020 statements.</p>
	EE	Producer Controlled Annual Report	
	FF	Workers Compensation Assessments	
	GG	Actuarial Guideline 51	Send Hardcopy mailed to the Chief Actuary, Rhonda Ahrens
	HH	PBR Actuarial Report	Send Hardcopy mailed to the Chief Actuary, Rhonda Ahrens

**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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