LIFE, ACCIDENT AND HEALTH INSURERS

(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	
Checklist	Line #	REQUIRED TELEVOSTOR THE ADOVE STATE	State	NAIC	State	DOEDATE	SOURCE	NOTES
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 ¹ /2"x14")	1	EO	XXX	3/1	NAIC	
	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	
	3	Separate Accounts Annual Statement (8 1/2"x14")	1	EO	XXX	3/1	NAIC	
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	1	EO	XXX	4/1	NAIC	
	11	Analysis of Annuity Operations by Lines of Business	1	EO	XXX	4/1	NAIC	
	12	Analysis of Increase in Annuity Reserves During Year	1	EO	XXX	4/1	NAIC	
	13	Credit Insurance Experience Exhibit	1	EO	XXX	4/1	NAIC	
	14	Health Care Exhibit (Parts 1, 2 and 3) Supplement	1	EO	XXX	4/1	NAIC	
	15	Health Care Exhibit's Allocation Report Supplement	1	EO	XXX	4/1	NAIC	
	16	Interest Sensitive Life Insurance Products Report	1	EO	XXX	4/1	NAIC	
	17	Investment Risk Interrogatories	1	EO	XXX	4/1	NAIC	
	18	Life, Health & Annuity Guaranty Assessment Base	1					
		Reconciliation Exhibit		EO	XXX	4/1	NAIC	
	19	Life, Health & Annuity Guaranty Assessment Base	1					
		Reconciliation Exhibit Adjustment Form		EO	XXX	4/1	NAIC	
	20	Long-term Care Experience Reporting Forms	1	EO	XXX	4/1	NAIC	
	21	Management Discussion & Analysis	1	EO	XXX	4/1	Company	
	22	Medicare Supplement Insurance Experience Exhibit	1	EO	XXX	3/1	NAIC	
	23	Medicare Part D Coverage Supplement	1	EO	XXX	3/1, 5/15, 8/15,	NAIC	
				50		11/15		
	24	Risk-Based Capital Report	1	EO	XXX	3/1	NAIC	
	25	Schedule SIS	1	N/A N/A	N/A	3/1 3/1	NAIC	0 1
	26	Supplemental Compensation Exhibit	1	IN/A	N/A	5/1	NAIC	Send separately - mark confidentia
	27	Supplemental Schedule O	1	EO	XXX	3/1	NAIC	
	28	Trusteed Surplus Statement	1	EO	XXX	3/1, 5/15, 8/15, 11/15	NAIC	
	29	Workers' Compensation Carve-Out Supplement	1	EO	XXX	3/1	NAIC	
	30	XXX/AXXX Reinsurance Exhibit	1	EO	XXX	4/1	NAIC	
	50	Actuarial Related Items	1	LO	ААА	1/1	Tune	
	31	Actuarial Certification Related Annuity Nonforfeiture	1	EO	XXX	3/1	Company	
	32	Ongoing Compliance for Equity Indexed Annuities Actuarial Certification Related to Hedging required by	1	EU	XXX	5/1	Company	
		Actuarial Guideline XLIII		EO		3/1	Company	
	33	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	1	EO	XXX	2/1	Compony	
	34	Actuarial Certification regarding use 2001 Preferred Class	1	EU		3/1	Company	
	54	Table	1	EO	XXX	3/1	Company	
	35	Actuarial Memorandum Related to Universal Life with	1	LO		5/1	Company	
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	55							
	55	Secondary Guarantee Policies required by Actuarial		N/A	xxx	4/30	Company	
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*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 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: <u>http://www.naic.org/public_lead_state_report.htm</u>

	NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
A	Required Filings Contact Person:	Domestic – Mary Verville Mary.Verville@ins.nh.gov, Christopher
		Jewell <u>Christopher.Jewell@ins.nh.gov</u> , Larry Lucas <u>Larry.Lucas@ins.nh.gov</u>
		Foreign – Mary Verville
		Mary.Verville@ins.nh.gov
		<i>Taxes</i> – Donna Arcand <u>Donna.Arcand@ins.nh.gov</u>
В	Mailing Address:	21 South Fruit Street, Suite 14, Concord
		NH 03301
С	Mailing Address for Filing Fees:	21 South Fruit Street, Suite 14, Concord
		NH 03301
D	Moiling Address for Promium Tax Desimants:	ATTN: Donna Arcand 21 South Fruit Street, Suite 14, Concord
L	Mailing Address for Premium Tax Payments:	NH 03301
		ATTN: Donna Arcand
E	Delivery Instructions:	Premium Taxes must be mailed
		separately from Annual Statement
		filings. Postmark is accepted
F	Late Filings:	Taxes – contact Donna Arcand
		Annual Statement – company will be
		fined \$25 per day for a late filing.
		Company's license may be suspended.
G	Original Signatures:	Original signatures required on all
		filings from domestic companies. Tax forms must have original signatures
Н	Signature/Notarization/Certification:	Annual Statements and Premium Tax
1	Signature/ Notarization/ Contineation.	form must be notarized
Ι	Amended Filings:	
J	Exceptions from normal filings:	
K	Bar Codes (State or NAIC):	
L	6	
Ν	I NONE Filings:	
N	Filings new, discontinued or modified materially since last year:	

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.

<u>Electronic filing is intended to be filing(s) submitted to the NAIC via the NAIC Internet Filing Site</u> 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 mailing 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.

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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.