

## FRATERNAL SOCIETIES

COMPANY NAME: \_\_\_\_\_ NAIC Company Code: \_\_\_\_\_

Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

REQUIRED FILINGS IN THE STATE OF: \_\_\_\_\_ Filings Made During the Year 2018

(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			
<b>I. NAIC FINANCIAL STATEMENTS</b>								
	1	Annual Statement (8 1/2"x14")	1	EO	xxx	3/1	NAIC	B
	1.1	Printed Investment Schedule detail (Pages E01-E27)	1	EO	xxx	3/1	NAIC	B
	2	Quarterly Financial Statement (8 1/2" x 14")	1	EO	xxx	5/15, 8/15, 11/15	NAIC	B
	3	Separate Accounts Annual Statement (8 1/2"x 14")	1	EO	xxx	3/1	NAIC	B
<b>II. NAIC SUPPLEMENTS</b>								
	11	Accident & Health Policy Experience Exhibit	1	EO	xxx	4/1	NAIC	B
	12	Analysis of Annuity Operations by Lines of Business	1	EO	xxx	4/1	NAIC	B
	13	Analysis of Increase in Annuity Reserves During Year	1	EO	xxx	4/1	NAIC	B
	14	Interest Sensitive Life Insurance Products Report	1	EO	xxx	4/1	NAIC	B
	15	Long-Term Care Experience Reporting Forms	1	EO	xxx	4/1	NAIC	B
	16	Management Discussion & Analysis	1	EO	xxx	4/1	Company	B
	17	Medicare Part D Coverage Supplement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	B
	18	Medicare Supplement Insurance Experience Exhibit	1	EO	xxx	3/1	NAIC	B
	19	Risk-Based Capital Report	1	EO	xxx	3/1	NAIC	B
	20	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	B
	21	Supplemental Health Care Exhibit (Parts 1, 2 and 3)	1	EO	xxx	4/1	NAIC	B
	22	Supplemental Health Care Exhibit's Allocation Report	1	EO	xxx	4/1	NAIC	B
	23	Supplemental Investment Risk Interrogatories	1	EO	xxx	4/1	NAIC	B
	24	Supplemental Term and Universal Life Insurance Reinsurance Exhibit	1	EO	xxx	4/1	NAIC	B
	25	Trusted Surplus Statement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	B
	26	Variable Annuities Supplement	1	EO	xxx	4/1	NAIC	B,N
	27	VM 20 Reserves Supplement	1	EO	xxx	3/1	NAIC	B,N
<b>Actuarial Related Items</b>								
	28	Actuarial Certification regarding use 2001 Preferred Class Table	1	EO	xxx	3/1	Company	B
	29	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	1	EO	xxx	3/1	Company	B
	30	Actuarial Certification Related to Hedging required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	B
	31	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	B
	32	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	1	N/A	xxx	4/30	Company	B
	33	Actuarial Opinion	1	EO	xxx	3/1	Company	B
	34	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	1	EO	xxx	3/1	Company	B
	35	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	1	EO	xxx	3/1	Company	B
	36	Actuarial Opinion on X-Factors	1	EO	xxx	3/1	Company	B
	37	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	1	EO	xxx	3/1	Company	B
	38	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	B
	39	Life PBR Exemption	1	EO		Commissioner 7/1 NAIC 8/15	Company	B,N
	40	Management Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	B
	41	RAAIS required by <i>Valuation Manual</i>	1	N/A	xxx	4/1	Company	B
	42	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	B
	43	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	B
	44	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	B

45	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	B
46	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	B
47	RBC Certification required under C-3 Phase I	1	EO	xxx	3/1	Company	B
48	RBC Certification required under C-3 Phase II	1	EO	xxx	3/1	Company	B
49	Statement on non-guaranteed elements – Exhibit 5 Int. #3	1	EO	xxx	3/1	Company	B
50	Statement on participating/non-participating policies – Exhibit 5, Inter. #1&2	1	EO	xxx	3/1	Company	B
<b>III. ELECTRONIC FILING REQUIREMENTS</b>							
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	
<b>IV. AUDIT/INTERNAL CONTROL RELATED REPORTS</b>							
81	Accountants Letter of Qualifications	1	EO	N/A	6/1	Company	B
82	Audited Financial Reports	1	EO	N/A	6/1	Company	B
83	Audited Financial Reports Exemption Affidavit	1	N/A	N/A		Company	B
84	Communication of Internal Control Related Matters Noted in Audit	1	EO	N/A	8/1	Company	B
85	Independent CPA (change)	1	N/A	N/A		Company	B
86	Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	B
87	Notification of Adverse Financial Condition	1	N/A	N/A		Company	B
88	Relief from the five-year rotation requirement for lead audit partner	1	EO	N/A	3/1	Company	B
89	Relief from the one-year cooling off period for independent CPA	1	EO	N/A	3/1	Company	B
90	Relief from the Requirements for Audit Committees	1	EO	N/A	3/1	Company	B
91	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A		Company	B
<b>V. STATE REQUIRED FILINGS***</b>							
101	Certificate of Compliance	0	0	0			
102	Certificate of Deposit	0	0	0			
103	Certificate of Valuation	0	0	0			
104	Corporate Governance Annual Disclosure***	0	0	0		Company	N
105	Filings Checklist (with Column 1 completed)	0	0	0			
106	Form B-Holding Company Registration Statement	1	0	0	6/1	Company	
107	Form F-Enterprise Risk Report ****	1	0	0		Company	
108	ORSA*****	1	0	0		Company	
109	Premium Tax	0	0	0			
110	State Filing Fees	1	0	1	3/1	State	C,P
111	Signed Jurat	0	0	1	3/1	NAIC	B,L,N
112	Application for Renewal	1	0	1	3/1	State	B,P
113	Retaliatory Statement	0	0	1	3/1	State	C,P
114	Fraud Unit Assessment	1	0	1	6/1	State	C

\*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](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](http://www.naic.org/public_lead_state_report.htm)**

**\*\*\*\*\*For those states that have adopted the NAIC updated 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. Consistent with the Form B filing requirements, 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. For more information on lead states, see the following NAIC URL: [http://www.naic.org/public\\_lead\\_state\\_report.htm](http://www.naic.org/public_lead_state_report.htm)**

	<b>NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)</b>	
A	<p>Required Filings Contact Persons:</p> <p>Ann Strickland, Examiner (334) 241-4154  <a href="mailto:Ann.Strickland@insurance.alabama.gov">Ann.Strickland@insurance.alabama.gov</a></p> <p>Belinda Williams, Examiner (334) 241-4162  <a href="mailto:Belinda.Williams@insurance.alabama.gov">Belinda.Williams@insurance.alabama.gov</a></p> <p>Todrick Burks, Examiner (334) 241-4163  <a href="mailto:Todrick.Burks@insurance.alabama.gov">Todrick.Burks@insurance.alabama.gov</a></p>	
B	<p>Mailing Address:  Premium Tax Returns and Payments: See note D  Fees: See note C</p> <p>Annual Statement hard copy filing not required for foreign insurers.</p> <p>All other Filings:</p> <p>Alabama Department of Insurance  P.O. Box 303351  Montgomery, AL 36130-3351</p> <p>or</p> <p>Alabama Department of Insurance  201 Monroe Street, Suite 502  Montgomery, AL 36104</p>	
C	<p>Mailing Address for Filing Fees:</p> <p>\$325.00 Audit &amp; Exam Fee, which is due March 1<sup>st</sup> must be attached to a completed Transmittal Form PR.  <a href="http://www.aldoi.gov/PDF/Companies/AuditExamTransmittalForm-PR.pdf">http://www.aldoi.gov/PDF/Companies/AuditExamTransmittalForm-PR.pdf</a></p> <p>The \$200 Fraud Unit Assessment, which is due June 1<sup>st</sup> must be attached to a completed transmittal Form PZ  <a href="http://www.aldoi.gov/PDF/Companies/FormPZ.pdf">http://www.aldoi.gov/PDF/Companies/FormPZ.pdf</a> and mailed to:</p> <p><u>Postal Service:</u> Alabama Department of Insurance  c/o Compass Bank  P. O. Box 830707  Birmingham, AL 35283-0707</p> <p>The \$55.00 Certificate of Authority renewal fee and \$25.00 annual statement filing fee should be attached to the completed Fees Return  <a href="http://www.aldoi.gov/PDF/Companies/DomesticFratFeesReturn.pdf">http://www.aldoi.gov/PDF/Companies/DomesticFratFeesReturn.pdf</a> and mailed along with the retaliatory statement if a foreign company to:</p> <p><u>Postal Service:</u> Alabama Department of Insurance  c/o Compass Bank  P. O. Box 830691  Birmingham, AL 35283-0691</p> <p><u>Courier Service:</u> Alabama Department of Insurance  c/o Compass Bank  701 South 32nd Street  Birmingham, AL 35233</p>	

D	<p>Mailing Address for Premium Tax Payments:</p> <p>Fraternal are exempt from premium tax.</p>	
E	<p>Delivery Instructions:</p> <p>All filings must be received no later than the due date. If the due date falls on a weekend or holiday, the due date is the next business day.</p>	
F	<p>Late Filings:</p> <p>Fraternal will be fined \$100 per day for late filing of the Annual Statement.</p>	
G	<p>Original Signatures:</p> <p>Original signatures are required on all filings from domestic companies. Foreign companies should follow the NAIC Annual Statement Instructions.</p>	
H	<p>Signature/Notarization/Certification:</p> <p>The President or Vice President and Secretary or Actuary are required to file the Annual Statement. Must be notarized.</p>	
I	<p>Amended Filings:</p> <p>Amended Annual Statements filed by domestic insurers must be properly bound and mailed along with an explanation of the Amendments to: 201 Monroe Street, Suite 502, Montgomery, AL 36104.</p>	
J	<p>Exceptions from normal filings:</p> <p>Annual Statements: An extension of up to 30 days can be granted only if the request is made in writing and good cause is shown. Foreign companies must furnish a copy home state approval, along with their written request.</p> <p>Audited Financial Statements: Requests for extension, exemption and to file on a consolidated basis must be made in writing at least 10 days prior to the due date.</p>	
K	<p>Bar Codes (State or NAIC)</p> <p>The NAIC Annual Statement Instructions should be followed.</p>	
L	<p>Signed Jurat:</p> <p>Email along with premium tax documentation to:  <a href="mailto:premiumtax@insurance.alabama.gov">premiumtax@insurance.alabama.gov</a>  <b>DO NOT</b> submit hard copy signed jurat page.</p>	
M	<p>NONE Filings:</p> <p>The NAIC Annual Statement Instructions should be followed.</p>	

N	<p>Filings new, discontinued or modified materially since last year:</p> <p><b>DO NOT</b> submit hard copy signed jurat page. Email along with premium tax documentation to: <a href="mailto:premiumtax@insurance.alabama.gov">premiumtax@insurance.alabama.gov</a> as referenced in note Q.</p> <p>Line 26 Variable Annuities Supplement  Line 27 VM 20 Reserves Supplement  Line 39 Life PBR Exemption  Line 104 Corporate Governance Annual Disclosure***  AL has <b>NOT</b> adopted the Corporate Governance Annual Disclosure Model Act.</p>	
O	<p>Domestic companies should mail the Annual and Quarterly Financial Statement, MDA, Supplement filings, and Audited Financial Statements to the Alabama Department of Insurance, 201 Monroe Street, Suite 1700, Montgomery, AL 36104.</p>	
P	<p>State Specific forms are located on the Insurance Department website at <a href="http://www.aldoi.gov/Companies/Forms.aspx">http://www.aldoi.gov/Companies/Forms.aspx</a></p>	

**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 include filing via the Internet or filing via diskette with the NAIC. Companies that file with the NAIC via the Internet are not required to submit diskettes 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 investments schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

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

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 investment schedule detail.

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

The **Supplemental .PDF Filing** is the .pdf file for all supplements 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 (E) 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 (generally, on its website). 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.