LIFE, ACCIDENT AND HEALTH/FRATERNAL INSURERS

COMPANY NAME:	_NAIC Company Code:
Contact:	Telephone:
REQUIRED FILINGS IN THE STATE OF:	_Filings Made During the Year 2025

 ${\bf FRATERNAL\ COMPANIES\ BEGIN\ FILING\ LIFE/FRATERNAL\ STATEMENT\ EFFECTIVE\ WITH\ FIRST\ QUARTER,\ 2019.}$

1. Annual Stutierpoem (b \(\frac{1}{2} \) \(\text{A} \) BO BO XXX 3/1 NAIC A E	(1)	(2)	(3)		(4) BER OF CO		(5)	(6) FORM	(7) APPLICABLE
1. AMAIC PENANCIAL STATEMENTS	Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE				DUE DATE	SOURCE**	NOTES
1 Annual Statement (S 47-14")			I NAIC EINANCIAI STATEMENTS	State	NAIC	State			
1.1. Printed Investment Schools defaul (Pages BDI & 29) EO EO XXX 31 NAIC E		1			ЕО	xxx	3/1	NAIC	A, E
3 Separate Accounts Annual Sumement (8 % N.4") 1 1 1 1 1 1 1 1 1				EO		XXX			
II. NAIC SUPPLEMENTS									
11		3	Separate Accounts Annual Statement (8 /2 A14)		EO	AAA	3/1	NAIC	E
12 Crodit Insurance Experience Exhibit E0 E0 XXX 47 NAIC F. 13 Health Supplement From the Company F. 14 Life, Health & Annuity Guaranty Association FO E0 XXX A71 NAIC F. 15 Long-term Care Experience Reporting Porms F. 16 Management Discovation & Analysis F. 17 Structure F. Company F. 18 Medicare Part Droverage Supplement E0 E0 XXX A71 NAIC F. 19 Medicare Supplement Insurance Experience Exhibit E0 E0 XXX A71 NAIC F. 19 Medicare Part Droverage Supplement E0 E0 XXX A71 NAIC F. 10 Medicare Supplement Insurance Experience Exhibit E0 E0 XXX A71 NAIC F. 15 Medicare Supplement Insurance Experience Exhibit E0 E0 XXX A71 NAIC F. 16 Medicare Supplement Insurance Experience Exhibit E0 E0 XXX A71 NAIC F. 17 ANALY E1 E1 E1 E1 E1 E1 E1 E					l				1_
13									
14									
15			Life, Health & Annuity Guaranty Association						
10 Management Discussion & Analysis EO EO XXX 41 Company E		15		EO		XXX			Е
For Year		16		EO	EO	XXX	4/1	Company	Е
19		17		ЕО	ЕО	XXX	3/1	NAIC	Е
DO		18	Medicare Supplement Insurance Experience Exhibit	EO	EO	XXX	3/1	NAIC	Е
21 Schedule SIS EO NA NA 3/1 NAIC E		19	Medicare Part D Coverage Supplement			XXX	11/15		
22 Supplemental Compensation Exhibit EO N/A N/A 3/1 N/AIC E									
23 Supplemental Health Care Exhibit (Parts 1 and 2) EO EO xxx 4/1 NAIC E									
24 Supplemental Investment Risk Interrogatories EO EO xxx 3/1 NAIC E									
25 Supplemental Schedule O									
26 Supplemental Term and Universal Life Insurance EO			11						
27 Trusteed Surplus Statement			Supplemental Term and Universal Life Insurance			XXX			
28		27		ЕО			3/1, 5/15, 8/15,		Е
29		20	Vi-1-1- Ai-i C1	EO					Б
Actuarial Related Items									
31 Actuarial Certification regarding use 2001 Preferred		30		EU	EO	XXX	3/1	NAIC	E
Class Table		21		EO	1	VVV	1	T	Е
Ongoing Compliance for Equity Indexed Annuities EO			Class Table		EO		3/1	Company	
with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D			Ongoing Compliance for Equity Indexed Annuities		EO		3/1	Company	
34 Actuarial Opinion on Separate Accounts Funding EO EO xxx xxx xxx EO EO		33	with Secondary Guarantee Policies required by	EO	NI/A	XXX	4/20	G	E
35 Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit		3/1		FΩ		vvv			F
36			Actuarial Opinion on Separate Accounts Funding					1	
37		36	Actuarial Opinion on Synthetic Guaranteed	ЕО		XXX			Е
38		37		EO		XXX			Е
Annuity Model Regulation							0, 0		
40 Executive Summary of the PBR Actuarial Report 41 Life Summary of the PBR Actuarial Report 42 Variable Annuities Summary of the PBR Actuarial Report 43 PBR Actuarial Report (provide upon request) 44 RAAIS required by Valuation Manual 45 Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV 46 Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV 47 Company E EO N/A xxx 4/1 Company E EO Xxx 3/1,5/15, 8/15, EO 11/15 Company E EO Xxx 3/1,5/15, 8/15, EO 11/15 Company E EO Xxx 3/1,5/15, 8/15, EO Xxx 3/1,5/15, 8/15, EO Xxx 3/1,5/15, 8/15, EO Xxx 1/1/15 Company E EO Xxx 3/1,5/15, 8/15, EO 11/15 Company E EO Xxx 1/1/15 Company E E EO Xxx 3/1,5/15, 8/15, EO 11/15 Company E E EO Xxx 3/1,5/15, 8/15, EO 11/15 Company E E EO Xxx 3/1,5/15, 8/15, EO 11/15 Company E E EO Xxx 3/1,5/15, 8/15, EO 11/15 Company E E EO Xxx 3/1,5/15, 8/15, EO 11/15 Company E E E EO Xxx 3/1,5/15, 8/15, EO 11/15 Company E E E EO Xxx 3/1,5/15, 8/15, EO		39	Annuity Model Regulation	ЕО	ЕО	XXX		Company	E, J
41 Life Summary of the PBR Actuarial Report EO N/A xxx 4/1 Company E							7/1 NAIC 8/15		
42 Variable Annuities Summary of the PBR Actuarial Report E Report									
43 PBR Actuarial Report (provide upon request) EO N/A xxx			Variable Annuities Summary of the PBR Actuarial						
44 RAAIS required by Valuation Manual 45 Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV 46 Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV 47 Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) 48 Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) 49 Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI Seo Substance Substa		/13		ΕO		VVV	4/1		F
45 Reasonableness & Consistency of Assumptions EO Reasonableness of Assumptions EO EO Xxx 3/1,5/15, 8/15, EO EO							4/1		
Certification required by Actuarial Guideline XXXV EO					1 N/ PA			Company	
by Actuarial Guideline XXXV Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) Peo xxx 3/1,5/15, 8/15, 11/15 Company EO xxx 3/1,5/15, 8/15, 11/15 Company Feo xxx 3/1,5/15, 8/15, 11/15 Company Peo xxx 3/1,5/15, 8/15, 11/15 Company Feo xxx 3/1 Company Feo xx			Certification required by Actuarial Guideline XXXV		ЕО		11/15	Company	
Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) 48 Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) 49 Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI 50 RBC Certification required under C-3 Phase I 51 RBC Certification required under C-3 Phase II 52 Statement on non-guaranteed elements - Exhibit 5 Int. #### ED #############################			by Actuarial Guideline XXXV		ЕО			Company	
Reasonableness & Consistency of Assumptions EO xxx 3/1,5/15, 8/15, EO xxx 3/1,5/15, 8/15, EO xxx 3/1,5/15, 8/15, EO xxx S/1,5/15, 8/15, EO S/11/15 EO S/		τ/	Certification required by Actuarial Guideline XXXVI	LO	EO	AAA		Company	
49 Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI 50 RBC Certification required under C-3 Phase I EO EO xxx 3/1 Company E 51 RBC Certification required under C-3 Phase II EO EO xxx 3/1 Company E 52 Statement on non-guaranteed elements - Exhibit 5 Int. #3 53 Statement on par/non-par policies - Exhibit 5 Int. 1&2 EO EO xxx 3/1 Company E HI. ELECTRONIC FILING REQUIREMENTS 61 Annual Statement Electronic Filing xxx EO xxx 3/1 NAIC E		48	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI	ЕО		XXX	3/1,5/15, 8/15,		Е
50 RBC Certification required under C-3 Phase I EO EO xxx 3/1 Company E		49	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by	ЕО		XXX	3/1,5/15, 8/15,		Е
S1		50		FO		XXX			E
52 Statement on non-guaranteed elements - Exhibit 5 Int. EO									
#3					20		31.2	Company	_
III. ELECTRONIC FILING REQUIREMENTS 61 Annual Statement Electronic Filing xxx EO xxx 3/1 NAIC E			#3		EO			Company	
61 Annual Statement Electronic Filing xxx EO xxx 3/1 NAIC E		53	Statement on par/non-par policies – Exhibit 5 Int. 1&2	ЕО	EO	XXX	3/1	Company	Е
							T		
62 March PDF Filing xxx EO xxx 3/1 NAIC E									

(1)	(2)	(3)	(4)			(6)	(7)	
Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	NUMBER OF COPIES* Domestic Foreign			DUE DATE	FORM SOURCE**	APPLICABLE NOTES
CHECKHST	Line "	REQUIRED FIELDO FOR THE ABOVE STATE	State	NAIC	State	DOLDINE	BOCKEL	NOTES
	63	Risk-Based Capital Electronic Filing	XXX	EO	N/A	3/1	NAIC	Е
	64	Risk-Based Capital .PDF Filing	XXX	EO	N/A	3/1	NAIC	Е
	65	Separate Accounts Electronic Filing	XXX	EO	XXX	3/1	NAIC	Е
	66	Separate Accounts .PDF Filing	XXX	EO	XXX	3/1	NAIC	Е
	67	Supplemental Electronic Filing	XXX	EO	XXX	4/1	NAIC	Е
	68	Supplemental .PDF Filing	XXX	EO	XXX	4/1	NAIC	Е
	69	Quarterly Statement Electronic Filing	XXX	EO	XXX	5/15, 8/15, 11/15	NAIC	Е
	70	Quarterly .PDF Filing	XXX	EO	XXX	5/15, 8/15, 11/15	NAIC	Е
	71	June .PDF Filing	XXX	EO	XXX	6/1	NAIC	Е
		-						
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountants Letter of Qualifications	EO	EO	N/A	6/1	Company	Е
	82	Audited Financial Reports	EO	EO		6/1	Company	Е
	83	Audited Financial Reports Exemption Affidavit	EO	N/A	N/A		Company	E, J
	84	Communication of Internal Control Related Matters	EO				1	E
		Noted in Audit		EO	N/A	8/1	Company	
	85	Independent CPA (change)	EO	N/A	N/A		Company	Е
	86	Management's Report of Internal Control Over	EO					Е
		Financial Reporting		N/A	N/A	8/1	Company	
	87	Notification of Adverse Financial Condition	EO	N/A	N/A		Company	Е
	88	Relief from the five-year rotation requirement for lead audit partner	EO	EO	XXX	3/1	Company	Е
	89	Relief from the one-year cooling off period for independent CPA	ЕО	EO	xxx	3/1	Company	Е
	90	Relief from the Requirements for Audit Committees	EO	EO	XXX	3/1	Company	Е
	91	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	EO	N/A	N/A		Company	E, J
		V. STATE REQUIRED FILINGS						
	101	Corporate Governance Annual Disclosure***	EO	0	XXX	6/1	Company	Е
	102	Filings Checklist (with Column 1 completed)	EO	0	XXX	XXX	State	Е
	103	Form B-Holding Company Registration Statement	EO	0	XXX	6/1	Company	E, S
	104	Form F-Enterprise Risk Report ****	EO	0	XXX	6/1	Company	E, T
	105	ORSA****	EO	0	XXX	12/1	Company	Е
	106	Premium Tax	-	0	-	-	State	Q
	107	State Filing Fees	-	0	-	-	State	P, Q
	108	Signed Jurat	XXX	0	EO	3/1	NAIC	L
	109	Group Capital Calculation (File with lead state only)	EO	0	XXX	6/1		Е
	110							
	111							
	112							
	113							

^{*}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 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-K APPLY TO A FILINGS)	ALL
A	Required Filings Contact Person:	ANNUAL STATEMENTS: BERG@Delaware.gov PREMIUM TAXES: DOI_Tax@Delaware.gov
В	Mailing Address:	Attn: BERG 1351 West North St., Ste 101 Dover, DE 19904
С	Mailing Address for Filing Fees:	Fees are included in the calculation of premium taxes. DO NOT send the fee payment with
D	Mailing Address for Premium Tax Payments: (does not include Form B Holding Company Registration Statement - go to note S)	the Annual Statement DO NOT include Premium Tax forms or payment in the annual statement package. Use OPTins to file Premium Taxes and fees electronically. Website: https://login.optins.org/optinsstatic/index .html or call (816) 783-8990.
E	Delivery Instructions:	For Annual Statements - Physical in office and electronic delivery are both required on or before the due date to the mailing address in Note B. If the due date falls on a weekend or holiday, then the deadline is extended to the next business day. Preferred method to receive secure email is via Egress. Egress is a free service that allows for secure transmission of large files. To Register for a free account use: Egress Switch Sign Up Electronic filings are to be sent to BERG@Delaware.gov. The assigned analyst will contact you directly if they require a hard copy of any items. The subject line of email must read as follows to be considered accepted: Due date of Filing, Full Company Name, NAIC# (i.e., 3/1 Filing, Company Name, NAIC#). Please submit a separate email for each company filing. Electronic signatures that comply with the Uniform Electronic Transactions Act, Title 6 Ch. 12A are currently being accepted. Note: If multiple emails are being sent
F	Late Filings:	for the same company, please number the submission 1 of 3 etc. PDF's must be bookmarked.
G	Original Signatures:	Original signatures required from domestic companies or electronic signatures that comply with the Uniform Electronic Transactions Act, Title 6 Ch. 12A are currently being accepted. Foreign companies should follow the instructions from the NAIC.
Н	Signature/Notarization/Certification:	OFFICERS TO SIGN: President or Vice-president, and Secretary or Actuary, as applicable, or, in the absence of the foregoing, by 2 other principal officers, or, if a reciprocal insurer, by the oath of the attorney-in-fact or it's like officers if a corporation
I	Amended Filings:	File within 10 days of amendment with explanation for the original filing and

		same should be followed for any amendment.
J	Exceptions from normal filings:	DOMESTIC: Apply at least 30 days prior to due date with written explanation. FOREIGN: Apply 10 days prior to due date
K	Bar Codes (State or NAIC):	
L	Signed Jurat:	FOREIGN Annual Signed Jurats should be emailed to: DOI_AnnualStatement@delaware.gov
M	NONE Filings:	If no entries are to be made, write "None", "Not Applicable" or "No Changes" to complete the item in accordance with the <i>NAIC Annual and Quarter Statement Instructions</i> . Blank items, i.e., schedules, interrogatory responses, supplemental compensation exhibit or Notes to the Financial Statements will not be considered properly filed.
N	Filings new, discontinued or modified materially since last year:	Regulation 303 repealed 5/1/2018
P	Statement Filing Fees:	Attach to Premium Tax report: Use OPTins to file Premium Taxes and fees electronically.
Q	Premium Tax report and payment	Includes statement filing fees Use OPTins to file Premium Taxes and fees electronically.
R		
S	Form B & C - Insurance Holding Company System Annual Registration Statement	FEE: \$100.00 per Holding Company Group- 18 Del. C. \$701(16)(a). Mail fee by check to: Attn: BERG 1351 West North St., Ste 101 Dover, DE 19904
Т	Form F - is required annually by holding company groups to lead state	FEE: None

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 <u>before</u> submitting a filing.

 $w:\qa\blanks\checklists\2025\ filings\2\ lifecklist_2024_filingsmade2025.docx$