PROPERTY & CASUALTY INSURERS / RRG

COMPANY NAME:	NAIC Company Code:				
Contact:		Telephone:			
REQUIRED FILINGS IN THE STATE OF	Oklahoma	Filings Made During the Vear	2020		

Cheedists Line # REGUIRED FILINGS FOR THE ARDVE STATE To Dompton DUE DATE SOURCES* NOTES	(1)	(2)	(3)	(4) NUMBER OF COPIES*		PIFS*	(5)	(6) FORM SOURCE**	(7) APPLICABLE
NAIC FINANCIAL STATEMENTS	Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE				DUE DATE		
1			`						
1.1 Printed Investment Schedule detail (Plages BDI-E29) 1 EO xxx 3/1 NAIC			I. NAIC FINANCIAL STATEMENTS			•			
2		1	Annual Statement (8 ½" x 14")	1	EO	XXX	3/1	NAIC	G, K
11 15 15 16 17 17 18 18 18 18 18 18		1.1	Printed Investment Schedule detail (Pages E01-E29)	1	EO	XXX	3/1	NAIC	
3		2	Quarterly Financial Statement (8 ½" x 14")	1	ЕО	xxx		NAIC	G, K
1		3	Protected Cell Annual Statement	1	0	xxx		NAIC	
H. NAIC SUPPLEMENTS				1					
11			comomet i initiati statement (e /2 ii i i)				0,1	11110	
12			II. NAIC SUPPLEMENTS		•				
12		11	Accident & Health Policy Experience Exhibit	1	EO	XXX	4/1	NAIC	
1		12		1	ЕО	XXX	3/1	Company	
1		13	Actuarial Opinion Summary	1	N/A	XXX	3/15	Company	
15		14		1		XXX	3/1		
16		15		1					
1				1					
Coverage Supplement						1			
Supplement Financial Guaranty Insurance Exhibit 1			Coverage Supplement	•			₩ €		
19		18	Director and Officer Insurance Coverage	1	ЕО	xxx		NAIC	
20		10		1	FO	VVV		NAIC	
21									
Reconciliation Exhibit Elo xxx 4/1 NAIC									
Reconciliation Exhibit Adjustment Form			Reconciliation Exhibit			XXX			
24 Management Discussion & Analysis 1 EO xxx 4/1 Company		22	Reconciliation Exhibit Adjustment Form	1	ЕО	XXX			
25 Medicare Part D Coverage Supplement 1 EO xxx 3/1, 5/15, 8/15, 11/15		23		1		XXX		NAIC	
26		24		1	EO	XXX	4/1	Company	
26 Medicare Supplement Insurance Experience Exhibit 1 EO xxx 3/1 NAIC 27 Premiums Attributed to Protected Cells Exhibit 1 EO xxx 3/1 NAIC 28 Reinsurance Attestation Supplement 1 EO xxx 3/1 Company 29 Exceptions to Reinsurance Attestation Supplement 1 N/A xxx 3/1 Company 30 Reinsurance Summary Supplemental 1 EO xxx 3/1 NAIC 31 Risk-Based Capital Report 1 EO xxx 3/1 NAIC 32 Schedule SIS 1 N/A N/A 3/1 NAIC 32 Schedule SIS 1 N/A N/A 3/1 NAIC 33 Supplement A to Schedule T 1 EO xxx 3/1 NAIC 37 Supplemental Compensation Exhibit 1 N/A N/A 3/1 NAIC 37 Supplemental Health Care Exhibit (Parts 1, 2 and 3) 1 EO xxx 4/1 NAIC 37 Supplemental Health Care Exhibit (Parts 1, 2 and 3) 1 EO xxx 4/1 NAIC 37 Supplemental Investment Risk Interrogatories 1 EO xxx 3/1 NAIC 38 Supplemental Investment Risk Interrogatories 1 EO xxx 3/1 NAIC 38 Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Supplemental Investment Risk Interrogatories 1 EO xxx 3/1 NAIC Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Supplemental Schedule for Reinsurance 1 EO xxx Supplemental Schedule for Reinsurance Supplemen		25	Medicare Part D Coverage Supplement	1	ЕО	XXX		NAIC	
27		26	Medicare Supplement Insurance Experience Exhibit	1	ЕО	XXX		NAIC	
29		27		1	ЕО	XXX			
30 Reinsurance Summary Supplemental 1 EO xxx 3/1 NAIC		28	Reinsurance Attestation Supplement	1	ЕО	XXX	3/1	Company	
30 Reinsurance Summary Supplemental 1 EO xxx 3/1 NAIC		29	Exceptions to Reinsurance Attestation Supplement	1	N/A	XXX	3/1	Company	
31 Risk-Based Capital Report 1 EO xxx 3/1 NAIC 32 Schedule SIS 1 N/A N/A 3/1 NAIC 33 Supplement A to Schedule T 1 EO xxx 3/1, 5/15, NAIC 34 Supplemental Compensation Exhibit 1 N/A N/A 3/1 NAIC 35 Supplemental Health Care Exhibit (Parts 1, 2 and 3) 1 EO xxx 4/1 NAIC 36 Supplemental Health Care Exhibit's Allocation Report Supplement Repor		30		1		XXX	3/1	NAIC	
32 Schedule SIS 1 N/A N/A 3/1 NAIC		31		1	ЕО	XXX	3/1	NAIC	
33 Supplement A to Schedule T		32		1	N/A	N/A	3/1		
34 Supplemental Compensation Exhibit 1 N/A N/A 3/1 NAIC		33	Supplement A to Schedule T	1		xxx	, ,	NAIC	
35 Supplemental Health Care Exhibit (Parts 1, 2 and 3) 1 EO xxx 4/1 NAIC		34	Supplemental Compensation Exhibit	1	N/A	N/A		NAIC	
36 Supplemental Health Care Exhibit's Allocation 1 EO xxx 4/1 NAIC									
37 Supplemental Investment Risk Interrogatories 1 EO xxx 4/1 NAIC 38 Supplemental Schedule for Reinsurance 1 EO xxx 3/1 NAIC Counterparty Reporting Exception – Asbestos and Pollution Contracts 1 EO xxx 3/1, 5/15, NAIC 39 Trusteed Surplus Statement 1 EO xxx 3/1, 5/15, 8/15, 11/15 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 Combined Annual Statement Electronic Filing xxx EO xxx 5/1 NAIC 66 Combined Annual Statement .PDF Filing xxx EO xxx 5/1 NAIC 67 Supplemental Electronic Filing xxx EO xxx 4/1 NAIC NAIC Xxx EO Xxx 5/1 NAIC X			Supplemental Health Care Exhibit's Allocation						
Supplemental Schedule for Reinsurance 1		37		1	FΩ	yvv	4/1	NAIC	
Counterparty Reporting Exception – Asbestos and Pollution Contracts 1						1			
1 EO xxx 3/1, 5/15, 8/15, 11/15 III. ELECTRONIC FILING REQUIREMENTS		30	Counterparty Reporting Exception – Asbestos and	1	LO	AAA	3/1	NAIC	
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 Combined Annual Statement Electronic Filing xxx EO xxx 5/1 NAIC 66 Combined Annual Statement .PDF Filing xxx EO xxx 5/1 NAIC 67 Supplemental Electronic Filing xxx EO xxx 4/1 NAIC		39		1	ЕО	xxx		NAIC	
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 Combined Annual Statement Electronic Filing xxx EO xxx 5/1 NAIC 66 Combined Annual Statement .PDF Filing xxx EO xxx 5/1 NAIC 67 Supplemental Electronic Filing xxx EO xxx 4/1 NAIC			HI ELECTRONIC EH INC DECHIDEMENTO		<u> </u>	<u> </u>		1	
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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 Combined Annual Statement Electronic Filing xxx EO xxx 5/1 NAIC 66 Combined Annual Statement .PDF Filing xxx EO xxx 5/1 NAIC 67 Supplemental Electronic Filing xxx EO xxx 4/1 NAIC									
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65 Combined Annual Statement Electronic Filing xxx EO xxx 5/1 NAIC 66 Combined Annual Statement .PDF Filing xxx EO xxx 5/1 NAIC 67 Supplemental Electronic Filing xxx EO xxx 4/1 NAIC									
66 Combined Annual Statement .PDF Filing xxx EO xxx 5/1 NAIC 67 Supplemental Electronic Filing xxx EO xxx 4/1 NAIC									
67 Supplemental Electronic Filing xxx EO xxx 4/1 NAIC						1			
		68	Supplemental PDF Filing	XXX	EO	XXX	4/1	NAIC	

(1)	(2)	(3)		(4)		(5)	(6)	(7)
(1)	(2)	(3)	NUMBER OF COPIES*		(3)	FORM	APPLICABLE	
Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	Domestic Foreign		DUE DATE	SOURCE**	NOTES	
			State	NAIC	State			
	69	Quarterly Statement Electronic Filing	XXX	ЕО	XXX	5/15, 8/15, 11/15	NAIC	
	70	Quarterly .PDF Filing	xxx	ЕО	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	
	83	Audited Financial Reports Exemption Affidavit	1	N/A	N/A	12/1	Company	
	84	Communication of Internal Control Related Matters Noted in Audit	1	ЕО	N/A	8/1	Company	
	85	Independent CPA (change)	1	N/A	N/A	12/1	Company	
	86	Management's Report of Internal Control Over	1	N/A	N/A	8/1		
		Financial Reporting					Company	
	87	Notification of Adverse Financial Condition	1	N/A	N/A	Within 10 days of finding	Company	
	88	Relief from the five-year rotation requirement for	1	EO	XXX	3/1		
		lead audit partner					Company	
	89	Relief from the one-year cooling off period for independent CPA	1	ЕО	XXX	3/1	Company	
	90	Relief from the Requirements for Audit Committees	1	EO	XXX	3/1	Company	
	91	Request to File Consolidated Audited Annual Statements	1	N/A	N/A	12/1	Company	
	92	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	
		V. STATE REQUIRED FILINGS***						
	101	Corporate Governance Annual Disclosure***	1	0	N/A	6/1	Company	J, R
	102	Filings Checklist (with Column 1 completed)	1	0	EO	3/1	State	S
	103	Holding Company Registration (Form B&C) and fee (Hard Copy and electronic filing)	1	0	0	5/1	Company	R
	104	Form F-Enterprise Risk Report ****	1	0	0	5/1	Company	R
	105	ORSA****	1	0	0	12/31	Company	
	106	Premium Tax Return with Payment Voucher including a copy of the State Page (OPTins required)	ЕО	0	EO	3/1	State	M, N, O, P, Q, S
	107	Quarterly Estimated Premium Tax Payments with Payment Vouchers (OPTins required)	EO	0	ЕО	4/15, 6/15, 9/15, 12/15	State	P, Q, S
	108	Jurat Page	0	0	EO	3/1	NAIC	S
	109	Certificate of Compliance	0	0	EO	3/1	State	S
	110	Certificate of Deposit	0	0	ЕО	3/1	State	S
	111	Agreement and Application Form	EO	0	EO	3/1	State	S
	112	WCPR Form 3000	EO	0	EO	3/1	State	S
	113	Certificate of Compliance of Advertisements	EO	0	EO	3/1	NAIC	S
	114	Publication Notice (only CO,GA,IN,ND, and SD)	0	0	EO	3/1	State	S
	115	Uniform Consent to Service of Process (with	If	0	If	3/1	State	F
	110	separate payment)	Applic	Ü	Applic	. J. 1	State	•
		1 1 7 /	able		able			

^{*}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: https://www.naic.org/public_lead_state_report.htm

Α	NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILING)	Financial Division – (405) 521-3966
A	Required Filings Contact Person:	Premium Tax - (405) 521-3966
В	New Mailing Address: effective 2/6/2020	New Address via U.S. Mail or Courier: Oklahoma Insurance Department Financial Division 400 NE 50 th Street
С	Mailing Address for Filing Fees:	Oklahoma City, OK 73105-1816 Same as B.
	Ivianing Address for Fining Fees.	Suite as B.
D	Delivery Instructions:	D-1: All filings are due on or before the dates indicated. D-2: Postmarks are acceptable. If the due date fall on a weekend or a holiday, the deadline is extended to the next business day. Metered mail must have a manually applied postmark to qualify as acceptable proof of mailing date.
Е	Late Filings:	A penalty of the greater of \$250.00 or \$100.00 pe day will be assessed for late filings. (36 O.S. \$311.1(B)). A penalty of \$500.00 per day will be assessed for late Holding Company filings. (36 O.S. \$1643). Late tax payments will carry an additional penalty of 10% of the tax due plus 6% interest per annum until paid. (36 O.S. \$630)
F	Original Signatures:	Original (wet) signatures are required on all documents requiring a signature.
G	Signature/Notarization/Certification/Jurat:	Domestic insurers: Original (wet) and Notarized signatures are required with the Company Seal affixed on any Jurat Page filed.
Н	Amended Filings:	Amended items must be filed within 10 days of their amendment, along with an explanation. Signature requirements are covered in F and G. Electronic filings of the corrections must be filed with NAIC.
I	Exceptions from normal filings:	Foreign Companies must provide a written copy of any exemption or extension received from its State of Domicile at least 10 days prior to the filing due date in order to receive such from Oklahoma. Domestic Companies must apply prior to December 1 to receive exemption.
J	Filings new, discontinued or modified materially since last year:	NEW: CGAD required (line 101)
K	Company Seal:	The Company Seal must be applied to the following document: Jurat Page.
L	Bar Codes (State or NAIC):	Follow the directions in the NAIC Annual Statement Instructions.
М	State Business Page:	A copy of the State Business Page must accompany the Premium Tax Return. If the State Business Page is "NONE", then mark and file the page as "NONE".
N	NONE Filings:	"NONE" filings must be made. Failure to file a "NONE" document will be treated as a filing violation. The only exception is the Designation of Agent filing, which is only required if a change h occurred.
О	Payments of Licenses, Fees, and Taxes:	O-1: Include annual license fee, review fee, fire marshal tax, and retaliatory tax if applicable. (OPTins mandated) O-2: For late payment fee, see E above.
P	Premium Tax Forms:	OPTins mandated, see S below.
Q	Worksheets:	Oklahoma Premium Tax Credits Worksheet is provided in OPTins to aid in the calculation of Home Office Credit, Historic Rehabilitation Credit, OCIB Credit, and Affordable Housing Credit.

R	Holding Company Filings:	ALL Holding Company filings MUST be filed electronically in PDF format in addition to the hard copy filing. The filings should be emailed to: HCAFilings@oid.ok.gov This applies to Forms A, B, C, D, E, F, R, including all supplements/attachments thereto. (The OID firewall limits total email size to 10MB or less. Use of secured website mail is NOT acceptable.) If file is larger than 10MB, please email HCAFilings@oid.ok.gov for instructions.
S	OPTins	Please refer to the OPTins State Participation Page for a list of due dates: http://www.optins.org/state_participation.htm

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

The Supplemental.PDF Filing is the .pdf file for all supplemental schedules and exhibits due April 1.

The Quarterly Statement Electronic Filing includes the complete quarterly statement data.

The Quarterly Statement.PDF Filing is the .pdf file for quarterly statement data.

The *Combined Annual Statement Electronic Filing* includes the required pages of the combined annual statement and the combined Insurance Expense Exhibit.

The *Combined Annual Statement.PDF Filing* is the .pdf file for the Combined annual statement data and the combined Insurance Expense Exhibit.

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.

w:\qa\blanks\checklists\2019 filings made in 2020\3 propcklist_2019_filingsmade2020.docx