LIFE, ACCIDENT AND HEALTH/FRATERNAL INSURERS

COMPANY N	NAME:
-----------	-------

NAIC Company Code:_____

Contact:				Teleph	one:				
REQUIRED FILINGS IN THE STATE OF: <u>NEW JERSEY</u>									
		IPANIES BEGIN FILING LIFE/FRATERNAL STATEMEN		-		-			
(1)	(2)	(3)		(4)		(5)	(6)	(7)	
Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE		IBER OF CO estic	PIES* Foreign	DUE DATE	FORM SOURCE**	APPLICABLE NOTES	
			State	NAIC	State				
		I. NAIC FINANCIAL STATEMENTS					-		
	1	Annual Statement (8 ¹ / ₂ "x14")	3	EO		3/1	NAIC		
	1.1	Printed Investment Schedule detail (Pages E01-E29)	3	EO	XXX	3/1	NAIC		
	2	Quarterly Financial Statement (8 ¹ / ₂ " x 14")	2	EO		5/15, 8/15, 11/15	NAIC		
	3	Separate Accounts Annual Statement (8 1/2"x14")	3	EO		3/1	NAIC		
		H. NALC CUDDI EMENTE							
	11	II. NAIC SUPPLEMENTS	2	БО		4/1	NAIC	1	
	11 12	Accident & Health Policy Experience Exhibit Credit Insurance Experience Exhibit	3	EO EO		4/1 4/1	NAIC NAIC		
	12	Health Supplement	3	EO	XXX	3/1	NAIC		
	13	Life, Health & Annuity Guaranty Association	3	EO	XXX XXX	4/1	NAIC		
	17	Assessable Premium Exhibit, Parts 1 and 2	5	LO	ллл	7/1	INAIC		
	15	Long-term Care Experience Reporting Forms	3	EO	XXX	4/1	NAIC		
	16	Management Discussion & Analysis	3	EO		4/1	Company		
	17	Market Conduct Annual Statement Premium Exhibit	3	EO		3/1	NAIC		
		for Year							
	18	Medicare Supplement Insurance Experience Exhibit	3	EO	XXX	3/1	NAIC		
	19	Medicare Part D Coverage Supplement	3	EO		3/1, 5/15, 8/15,	NAIC		
						11/15			
	20	Risk-Based Capital Report	1	EO		3/1	NAIC		
	21	Schedule SIS	3	N/A	N/A	3/1	NAIC		
	22	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC		
	23	Supplemental Health Care Exhibit (Parts 1 and 2)	3	EO EO		4/1 4/1	NAIC NAIC		
	24	Supplemental Investment Risk Interrogatories Supplemental Schedule O		EO					
-	25 26	Supplemental Term and Universal Life Insurance	3	EO	XXX	3/1 4/1	NAIC NAIC		
	20	Reinsurance Exhibit	5	EO		4/1	NAIC		
	27	Trusteed Surplus Statement	3	EO	XXX	3/1, 5/15, 8/15,	NAIC		
	- /		5	20		11/15	1.1.10		
	28	Variable Annuities Supplement	3	EO		4/1	NAIC		
	29	VM 20 Reserves Supplement	3	EO		3/1	NAIC		
	30	Workers' Compensation Carve-Out Supplement	3	EO		3/1	NAIC		
		Actuarial Related Items							
	31	Actuarial Certification regarding use 2001 Preferred	1	EO		3/1	Company		
		Class Table				2/1			
	32	Actuarial Certification Related Annuity Nonforfeiture	3	EO		3/1	Company		
-	22	Ongoing Compliance for Equity Indexed Annuities	1	NI/A	VVV	4/20	Compony		
	33	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by	1	N/A	XXX	4/30	Company		
		Actuarial Guideline XXXVIII 8D							
	34	Actuarial Opinion	3	EO		3/1	Company	Actuary	
		1					1 2	Must Be	
								Qualified	
	35	Actuarial Opinion on Separate Accounts Funding		EO		3/1	Company		
	26	Guaranteed Minimum Benefit				2/1	0	l	
	36	Actuarial Opinion on Synthetic Guaranteed		EO		3/1	Company		
	37	Investment Contracts Actuarial Opinion on X-Factors	ł	EO		3/1	Company		
	38	Actuarial Opinion on X-Factors Actuarial Opinion required by Modified Guaranteed	3	EO		3/1 3/1	Company Company		
	30	Annuity Model Regulation	5			5/1	Company		
	39	Request for Life PBR Exemption		E/O		Commissioner	Company	If	
		· · · · · · · · · · · · · · · · · · ·				7/1 NAIC 8/15		Applicable	
	40	Executive Summary of the PBR Actuarial Report	3	N/A		4/1	Company		
	41	Life Summary of the PBR Actuarial Report	1	N/A		4/1	Company		
	42	Variable Annuities Summary of the PBR Actuarial		N/A		4/1	Company		
ļ		Report	ļ				~		
	43	PBR Actuarial Report (provide upon request)	<u> </u>	N/A			Company		
	44	RAAIS required by Valuation Manual	1	N/A	1	4/1	Company	See Note O	

(1)	(2)	(3)	NILINA	(4) BER OF CC	PIES*	(5)	(6) FORM	(7) ADDI ICADI E
Checklist	Line #	× ·	NUMBER OF COPIES* Domestic Foreign			DUE DATE	FORM SOURCE**	APPLICABLE NOTES
			State	NAIC	State		SOURCE	
	45	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	3	EO	XXX	3/1,5/15, 8/15, 11/15	Company	
	46	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	XXX	3/1,5/15, 8/15, 11/15	Company	
	47	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	
	48	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	
	49	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	
	50	RBC Certification required under C-3 Phase I	1	EO		3/1	Company	
	51	RBC Certification required under C-3 Phase II	1	EO		3/1	Company	
	52	Statement on non-guaranteed elements - Exhibit 5 Int. #3	3	EO		3/1	Company	
	53	Statement on par/non-par policies – Exhibit 5 Int. 1&2	3	EO		3/1	Company	
		III. ELECTRONIC FILING REQUIREMENTS		ı	ı		L	L
	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	If Applicabl
	82	Audited Financial Reports	1	EO		6/1	Company	If Applicable See Note I
	83	Audited Financial Reports Exemption Affidavit	1	N/A	N/A		Company	If Applicabl
	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	If Applicabl
	86	Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	If Applicabl
	87	Notification of Adverse Financial Condition	1	N/A	N/A		Company	If Applicabl
	88	Relief from the five-year rotation requirement for lead audit partner	1	EO		3/1	Company	Must Be Written
	89	Relief from the one-year cooling off period for independent CPA	1	EO		3/1	Company	Must Be Written
	90	Relief from the Requirements for Audit Committees	1	EO		3/1	Company	Must Be Written
	91	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A		Company	Must Be Written
		V. STATE REQUIRED FILINGS					~	
	101	Corporate Governance Annual Disclosure***	1	0	0	6/1	Company	
	102	Filings Checklist (with Column 1 completed)	1	0	1	3/1	State	·
	103	Form B-Holding Company Registration Statement	1	0		4/1	Company	If Applicable N.J.S.A.

(1)	(2)	(3)	(4) NUMBER OF COPIES*			(5)	(6) FORM	(7) APPLICABLE
Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	Domestic Foreign		DUE DATE	SOURCE**	NOTES	
			State	NAIC	State			
	104	Form F-Enterprise Risk Report ****	1	0		4/1	Company	If Applicable. N.J.S.A. 17:27A(3)
	105	ORSA****	1	0		12/1	Company	If Applicable. N.J.S.A. 17:23-31
	106	Premium Tax	2	0	2	3/1	State	Form Sent By Taxation. See Note Q
	107	State Filing Fees	1	0	1	3/1	State	See Fee Letter On DOBI Website
	108	Signed Jurat	XXX	0	1	3/1	NAIC	See Notes H and L
	109	Group Capital Calculation	1	0		4/1	Company	File with Lead State Only. See Note R
	110	Certificate of Authority Renewal					State	See Note S

*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: <u>http://www.naic.org/public_lead_state_report.htm</u>.

****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>

*****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 <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: <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:	Ayanna King Telephone: (609) 940-7314 Email: <u>Ayanna.King@dobi.nj.gov</u>
В	Mailing Address:	Office of Solvency Regulation P. O. Box 325 Trenton, NJ 08625-0325
B-1	Address for delivery by Courier Services (UPS, FedEx, DHL):	20 West State Street, 10th Floor Trenton, NJ 08608
С	Mailing Address for Filing Fees:	Same as above
D	Mailing Address for Premium Tax Payments : If missing form please call Lisa McCoy, Dept. of Treasury, (609) 322-6257 or visit the Dept. of treasury's website: <u>http://www.state.nj.us/treasury/taxation/prntins.shtml</u> to download tax forms.	New Jersey Division of Taxation Special Audit-Insurance P.O. Box 247 3 John Fitch Way, 2 nd Floor Trenton, NJ 08695
D-1	Address for delivery of Tax Forms by Courier Services (UPS, FedEx, DHL):	200 Woolverton Street, Building 20, Trenton, NJ 08646
E	Delivery Instructions:	All filings must be received no later than the indicated due date. If the due date falls on a weekend or holiday, the deadline is extended to the next business day.
F	Late Filings:	Companies will be fined \$100 per day for a late filing. Company's license may be suspended if the annual statement is received more than 30 days late.
G	Original Signatures:	Original signatures required from domestic companies. Foreign companies should follow instructions in the NAIC Annual Statement Instructions.
Н	Signature/Notarization/Certification:	President and Secretary, or in their absence, two principal officers must sign the annual statement. Reinsurance summary must be notarized.
I	Amended Filings:	Amended items must be filed within 10 days of the amendment, along with the explanation of the amendments. If there are signature requirements for original filings, same should be followed for any amendment.
J	Exceptions from normal filings:	Foreign companies must supply a written copy of any exemption or extension received from its state of domicile 10 days prior to the filing due date to receive such from NJ. Domestic companies should apply at least 30 days prior to the due date.
К	Bar Codes (State or NAIC):	Not Required
L	Signed Jurat:	All foreign companies must file a copy of the Jurat Page of its annual

		statement to allow New Jersey to
		update its database.
М	NONE Filings:	See NAIC Annual Statement
		Instructions.
N	Filings new, discontinued or modified materially since last year:	All filings must be received by their
		due date.
0	RAAIS	Required of all carriers per Valuation
		Manual and should be sent to: Attn:
		kerline.pierre@dobi.nj.gov New
		Jersey Department of Banking and Insurance, Life and Health
		Actuarial
		20 W. State Street, 11 th Floor or
		P.O. Box 325 Trenton, NJ 08625-
		0325
Р	Audited Financial Reports: \rightarrow	The Department amended N.J.A.C.
		11:2-26.18(b), effective August 18,
		2014, to add a new subparagraph to
		provide that hard copies of Annual
		Audit Reports submitted by Foreign
		and Alien insurers would not be
		required if they contain an
		"unqualified opinion" as set forth in
		the applicable NAIC Financial Analysis Handbook in use at the time
		such report is due and there is no
		unremediated material weakness
		noted in the report as set forth in
		N.J.A.C. 11-2-26.11. A copy of any
		notification of adverse financial
		condition report filed with the other
		state still must be filed with this
		Department within the timeframe
		specified in N.J.A.C. 11:2-26.10
Q	Premium taxes: A copy MUST be sent to \rightarrow	State of New Jersey Department of
		Banking and Insurance
		Office of Solvency Regulation
		P.O. Box 325
		Trenton, NJ 08625-0325 Attn: Tanyeer Ahmed
		FedEx, & UPS mail to:
		20 W. State Street, 10 th Floor,
		Trenton, NJ 08608
R	Group Capital Calculation	Group Capital Calculation became
		effective in New Jersey on April 1,
		2023. The filing is due on April 1,
		2025, for the Year-end 2024.
S	Certificate of Authority Renewal	All renewable Certificates will be
	-	emailed to the email addresses on file
		in SBS. Please make sure all emails in
		SBS are up to date.

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 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.