

**PROPERTY & CASUALTY INSURERS**

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

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

REQUIRED FILINGS IN THE STATE OF: \_\_\_\_\_ Filings Made During the Year 2012

(1) Check-list	(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				
		<b>I. NAIC FINANCIAL STATEMENTS</b>						
	1	Annual Statement (8 1/2" x 14")	1	EO	xxx	3/1	NAIC	B, S
	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")		EO		5/15, 8/15, 11/15	NAIC	
			1		xxx			B,S
	3	Protected Cell Annual Statement	0	0	0	3/1	NAIC	
	4	Combined Annual Statement (8 1/2" x 14")	0	EO	0	5/1	NAIC	
		<b>II. NAIC SUPPLEMENTS</b>						
	10	Accident & Health Policy Experience Exhibit	1	EO	xxx	4/1	NAIC	B
	11	Actuarial Opinion	1	EO	1	3/1	Company	B
	12	Actuarial Opinion Summary	1	N/A	xxx	3/15	Company	B
	13	Bail Bond Supplement	1	EO	xxx	3/1	NAIC	B
	14	Combined Insurance Expense Exhibit	0	EO	0	5/1	NAIC	
	15	Credit Insurance Experience Exhibit	1	EO	xxx	4/1	NAIC	B
	16	Director and Officer Supplement		EO		5/15, 8/15, 11/15	NAIC	
			1		xxx			
	17	Exceptions to Reinsurance Attestation Supplement	1	N/A	xxx	3/1	Company	B
	18	Financial Guaranty Insurance Exhibit	1	EO	xxx	3/1	NAIC	B
	19	Health Care Exhibit (Parts 1, 2 and 3) Supplement	1	EO	xxx	4/1	NAIC	B
	20	Health Care Exhibit's Allocation Report Supplement	1	EO	xxx	4/1	NAIC	B
	21	Investment Risk Interrogatories	1	EO	xxx	4/1	NAIC	B
	22	Insurance Expense Exhibit	1	EO	xxx	4/1	NAIC	B
	23	Long Term Care Experience Reporting Forms	1	EO	xxx	4/1	NAIC	B
	24	Management Discussion & Analysis	1	EO	N/A	4/1	Company	B
	25	Medicare Supplement Insurance Experience Exhibit	1	EO	xxx	3/1	NAIC	B
	26	Medicare Part D Coverage Supplement		EO		3/1, 5/15, 8/15, 11/15	NAIC	
			1		xxx			B
	27	Premiums Attributed to Protected Cells Exhibit	0	EO	0	3/1	NAIC	
	28	Reinsurance Attestation Supplement	1	EO	xxx	3/1	Company	B
	29	Reinsurance Summary Supplemental	1	EO	xxx	3/1	NAIC	B
	30	Risk-Based Capital Report	1	EO	xxx	3/1	NAIC	B
	31	Schedule SIS	1	N/A	N/A	3/1	NAIC	B
	32	Supplement A to Schedule T		EO		3/1, 5/15, 8/15, 11/15	NAIC	
			1					B
	33	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	B
	34	Trusted Surplus Statement		EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
			1					B
		<b>III. ELECTRONIC FILING REQUIREMENTS</b>						
	50	Annual Statement Electronic Filing	xxx	1	xxx	3/1	NAIC	
	51	March .PDF Filing	xxx	1	xxx	3/1	NAIC	
	52	Risk-Based Capital Electronic Filing	xxx	1	N/A	3/1	NAIC	
	53	Risk-Based Capital .PDF Filing	xxx	1	N/A	3/1	NAIC	
	54	Combined Annual Statement Electronic Filing	xxx	1	xxx	5/1	NAIC	
	55	Combined Annual Statement .PDF Filing	xxx	1	xxx	5/1	NAIC	
	56	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	
	57	Supplemental .PDF Filing	xxx	1	xxx	4/1	NAIC	
	58	Quarterly Statement Electronic Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
	59	Quarterly .PDF Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
	60	June .PDF Filing	xxx	1	xxx	6/1	NAIC	
		<b>IV. AUDIT/INTERNAL CONTROL RELATED REPORTS</b>						
	71	Accountants Letter of Qualifications	1	EO	N/A	6/1	Company	B
	72	Audited Financial Reports	1	EO	N/A	6/1	Company	B
	73	Audited Financial Reports Exemption Affidavit	1	N/A	N/A		Company	B
	74	Communication of Internal Control Related Matters Noted in Audit	1	N/A	N/A	8/1	Company	B
	75	Independent CPA (change)	1	N/A	N/A		Company	B

76	Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	B
77	Notification of Adverse Financial Condition	1	N/A	N/A		Company	B
78	Report of Significant Deficiencies in Internal Controls	1	N/A	N/A		Company	B
79	Request for Exemption to File	1	N/A	N/A		Company	
80	Request to File Consolidated Audited Annual Statements	1	N/A	N/A		Company	B
81	Relief from the one-year cooling off period for independent CPA	1	EO	N/A	3/1	Company	B
82	Relief from the Requirements for Audit Committees	1	EO	N/A	3/1	Company	B
<b>V. STATE REQUIRED FILINGS</b>							
101	Certificate of Compliance	0	0	1	3/1	State	B
102	Certificate of Deposit	0	0	1	3/1	State	B
103	Filings Checklist (with Column 1 completed)	0	0	0		State	
104	Premium tax	1	0	1	3/1, 5/15, 8/15, 11/15	State	D
105	State Filing Fees	1	0	1	3/1	State	C,P
106	Signed Jurat	0	0	1	3/1	NAIC	B,L
107	Holding Company Registration Statement	1	0	0	6/1	Company	O
108	Application For Renewal	1	0	1	3/1	State	B
109	Official List	1	0	1	3/1	State	B
110	Documentation for Premium Tax Return	1	0	1	3/1	Company	Q
111	Alabama Business Page	1	1	1	3/1	NAIC	R
112	Retaliatory Tax Statement	0	0	1	3/1	State	D
113	Office Facilities Worksheet	1	0	1	3/1	State	D,S

\* ALDOI no longer accepts paper filings of foreign insurers' annual financial statements. All foreign insurers' annual financial statements must be submitted electronically to the National Association of Insurance Commissioners (NAIC) in lieu of submitting a paper copy to the Department.

\*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.

	<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:</p> <p>Premium Tax Returns and Payments: See note D  Fees: See note C</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>Certificate of Authority Renewal Fee: \$505.00, \$1,005.00, or \$1,505.00</p> <p>Reciprocals: \$505.00</p> <p>Companies Licensed to Write:  Property Only, Casualty Only, or Disability Only - \$505.00  If Licensed to write Property and Casualty - \$1,005.00  If Licensed to write Property, Casualty and Disability - \$1,505.00</p> <p>Annual Statement Filing Fee: \$25.00 The Renewal Fee and Filing Fee must be submitted with the Premium Tax Return and mailed to:  Postal Service: Alabama Department of Insurance  c/o Compass Bank  P. O. Box 830691  Birmingham, AL 35283-0691</p> <p>Insurers may file their premium tax returns and pay premium tax, COA renewal fee and the annual statement filing fee through the NAIC OPTins program.</p> <p>\$850.00 Audit &amp; Exam Fee: – Must be attached to a completed Transmittal Form and mailed to: P. O. Box 830707, Birmingham, AL 35283-0707</p> <p>Courier Service: Alabama Department of Insurance  c/o Compass Bank  701 South 32nd Street  Birmingham, AL 35233</p>	

D	<p>Mailing Address for Premium Tax Payments:  Postal Service: Alabama Department of Insurance  c/o Compass Bank  P. O. Box 830691  Birmingham, AL 35283-0691</p> <p>Courier Service: Alabama Department of Insurance  c/o Compass Bank  701 South 32nd Street  Birmingham, AL 35233</p> <p>Premium Tax Payments must be submitted with completed Premium Tax Returns.</p> <p>Insurers may file their premium tax returns and pay premium tax, COA renewal fee and the annual statement filing fee electronically through the NAIC OPTins program at <a href="http://www.naic.org/OPTins">www.naic.org/OPTins</a></p>	
E	<p>Delivery Instructions:</p> <p><b>All Filings must be received no later than the due date.</b> The postmark date will not be accepted as the filing 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>Annual Statements: The fine is \$250.00 and the company's Certificate of Authority can be suspended or revoked for failure to timely file.  Premium Tax Returns and Premium Tax: The fine is \$1,000-\$10,000 for late Filings and Payment.</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 companies 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 of home state approval along with their written request for extension.</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> <p>Premium Tax Returns and Premium Tax: No extensions.</p>	

K	Bar Codes (State or NAIC)  The NAIC Annual Statement Instructions should be followed.	
L	Signed Jurat:  Annual Statement Only: Submit signed Jurat page to the referenced address in note B, Not required for Quarterly statement.	
M	NONE Filings:  The NAIC Annual Statement Instructions should be followed.	
N	Filings new, discontinued or modified materially since last year:  None.	
O	Domestic companies are required to file a Holding Company Registration Statement and pay a \$500.00 filing fee no later than June 1. It should be mailed to the Alabama Department of Insurance, 201 Monroe Street, Suite 502, Montgomery, AL 36104.	
P	State Specific forms are located on the Insurance Department Website at <a href="http://www.aldoi.gov/Companies/Forms">www.aldoi.gov/Companies/Forms</a> and then either Foreign Insurance Companies/Foreign Property and Casualty or Domestic Insurance Companies/Domestic Property and Casualty.	
Q	All premium tax credits/deductions taken on the annual premium tax return should be documented with copies of cancelled checks and privilege tax returns (1 <sup>st</sup> page only), ad valorem tax notices, guaranty fund and Alabama Health Insurance Plan assessment notices, invoices. Premiums which are taxed at less than the maximum should be documented with detailed policy runs. <b>Documentation must be emailed to: <a href="mailto:premiumtax@insurance.alabama.gov">premiumtax@insurance.alabama.gov</a></b> The subject line of the email must have the name of the company and the year. <b>Do not send hard copies of the documentation.</b>	
R	The Alabama business page should be emailed along with premium tax documentation to <a href="mailto:premiumtax@insurance.alabama.gov">premiumtax@insurance.alabama.gov</a>	
S	All foreign insurers' annual financial statements must be submitted electronically to the National Association of Insurance Commissioners (NAIC) in lieu of submitting a paper copy to the Department. All domestic insurers are still required to submit annual and quarterly statements in paper copy to the Department as well as electronically to the NAIC by the statutory due 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.

**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 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 (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 (EX4) 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.