

PROPERTY & CASUALTY INSURERS

COMPANY NAME: _____ NAIC Company Code: _____

Contact: _____ Telephone: _____

REQUIRED FILINGS IN THE STATE OF: _____ Filings Made During the Year 2026

(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						
			State	NAIC	State				
I. NAIC FINANCIAL STATEMENTS									
1	Annual Statement (8 1/2" x 14")		1	EO	XXX	3/1	NAIC	B,E- 2,F,L,Q,R	
1.1	Printed Investment Schedule detail (Pages E01-E29)		1	EO	XXX	3/1	NAIC		
2	Quarterly Financial Statement (8 1/2" x 14")		1	EO		5/15, 8/15, 11/15	NAIC		
3	Protected Cell Annual Statement		1	0	XXX	3/1	NAIC		
4	Combined Annual Statement (8 1/2" x 14")		1	EO	XXX	5/1	NAIC		
II. NAIC SUPPLEMENTS									
11	Accident & Health Policy Experience Exhibit		1	EO		4/1	NAIC	R-1	
12	Actuarial Opinion		1	EO		3/1	Company		
13	Actuarial Opinion Summary		1	N/A		3/15	Company		
14	Bail Bond Supplement		1	EO		3/1	NAIC		
15	Combined Insurance Expense Exhibit		1	EO		5/1	NAIC		
16	Credit Insurance Experience Exhibit		1	EO	xxx	4/1	NAIC		
17	Cybersecurity Insurance Coverage Supplement		1	EO		4/1	NAIC		
18	Director and Officer Insurance Coverage Supplement		1	EO		3/1, 5/15, 8/15, 11/15	NAIC		
19	Exhibit of Other Liabilities By Lines of Business as Reported on Line 17 of the Exhibit of Premiums and Losses		1	EO		3/1	NAIC		
20	Financial Guaranty Insurance Exhibit		1	EO		3/1	NAIC		
21	Insurance Expense Exhibit		1	EO	xxx	4/1	NAIC		
22	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit, Parts 1 and 2		1	EO	xxx	4/1	NAIC		
23	Long-Term Care Experience Reporting Forms		1	EO	xxx	4/1	NAIC		
24	Management Discussion & Analysis		1	EO		4/1	Company		
25	Market Conduct Annual Statement Premium Exhibit for Year		1	EO		3/1	NAIC		
26	Medicare Part D Coverage Supplement		1	EO		3/1, 5/15, 8/15, 11/15	NAIC		
27	Medicare Supplement Insurance Experience Exhibit		1	EO	xxx	3/1	NAIC		
28	Mortgage Guaranty Insurance Exhibit		1	EO	xxx	4/1	NAIC		
29	Premiums Attributed to Protected Cells Exhibit		1	EO		3/1	NAIC		
30	Private Flood Insurance Supplement		1	EO		4/1	NAIC		
31	Reinsurance Attestation Supplement		1	EO	xxx	3/1	Company		
32	Exceptions to Reinsurance Attestation Supplement		1	N/A	xxx	3/1	Company		
33	Reinsurance Summary Supplemental		1	EO	xxx	3/1	NAIC		
34	Risk-Based Capital Report		1	EO		3/1	NAIC		
35	Schedule SIS		1	N/A	N/A	3/1	NAIC		
36	Supplement A to Schedule T		1	EO		3/1, 5/15, 8/15, 11/15	NAIC		
37	Supplemental Compensation Exhibit		1	N/A	N/A	3/1	NAIC		
38	Supplemental Health Care Exhibit (Parts 1 and 2)		1	EO		4/1	NAIC		
39	Supplemental Investment Risk Interrogatories		1	EO		4/1	NAIC		
40	Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts		1	EO		3/1	NAIC		
41	Trusted Surplus Statement		1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC		
III. ELECTRONIC FILING REQUIREMENTS									
61	Annual Statement Electronic Filing		1	EO	xxx	3/1	NAIC	R-1	
62	March .PDF Filing		1	EO	xxx	3/1	NAIC		
63	Risk-Based Capital Electronic Filing		1	EO	N/A	3/1	NAIC		
64	Risk-Based Capital .PDF Filing		1	EO	N/A	3/1	NAIC		
65	Combined Annual Statement Electronic Filing		1	EO	xxx	5/1	NAIC		

(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			
	66	Combined Annual Statement .PDF Filing	1	EO	XXX	5/1	NAIC	
	67	Supplemental Electronic Filing	1	EO	XXX	4/1	NAIC	
	68	Supplemental .PDF Filing	1	EO	XXX	4/1	NAIC	
	69	Quarterly Statement Electronic Filing	1	EO	XXX	5/15, 8/15, 11/15	NAIC	
	70	Quarterly .PDF Filing	1	EO	XXX	5/15, 8/15, 11/15	NAIC	
	71	June .PDF Filing	1	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		Company	J
	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	
	86	Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	
	87	Notification of Adverse Financial Condition	1	N/A	N/A		Company	B, E-2
	88	Relief from the five-year rotation requirement for lead audit partner	1	EO		3/1	Company	
	89	Relief from the one-year cooling off period for independent CPA	1	EO		3/1	Company	
	90	Relief from the Requirements for Audit Committees	1	EO		3/1	Company	
	91	Request to File Consolidated Audited Annual Statements	1	N/A	N/A		Company	
	92	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A		Company	J
		V. STATE REQUIRED FILINGS***						
	101	Corporate Governance Annual Disclosure***	1	0			Company	
	102	Filings Checklist (with Column 1 completed)	1	0			State	
	103	Form B-Holding Company Registration Statement					Company	<u>Holding Company Forms</u>
			1	0				
	104	Form F-Enterprise Risk Report ****	1	0			Company	
	105	ORSA *****	1	0			Company	
	106	Premium Tax	1	0			State	D,R
	107	State Filing Fees	1	0			State	C,E-L,O,R
	108	Signed Jurat	1	0			NAIC	B, E-2, F, L, N, Q, R
	109	Group Capital Calculation (File with lead state only)	1	0			State	
	110							
	111							

*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.

****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

*****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 ALL FILINGS)	
	A	Required Filings and Statutory Deposit Contact	Company.admissions@doi.nv.gov
	B	<p>Electronic Financial Filing Submission:</p> <p>For NAIC checklist Requirements Do not file through SERFF</p>	<p>For Domestic Companies, Companies not filing with NAIC, Accredited Reinsurers and Purchasing Groups:</p> <p>www.doi.nv.gov/Insurers/</p> <p>Documents eligible for submission through the portal will have a “SUBMIT” link. Certain documents may not be submitted through the portal and must be submitted by email to the department. Please do not mail in hard copies of filings submitted through this portal.</p>
	C	<p>Payment of Filings Fees</p> <p>Electronic Company Invoice Service Portal:</p> <p>Annual Renewal Payments:</p> <p>Does not apply to: Individuals/ agencies/ entities Licensed under NRS 683A or NRS 692</p>	<p>www.doi.nv.gov/Insurers/</p> <p>Company Invoices are available for viewing via the Company Invoice Service Portal.</p> <p>Payment information is included on the company invoice.</p>
	D	<p>Mailing Address for Premium Tax Payments and Premium Tax Filings</p> <p>For all companies except Captives:</p>	<p>Nevada Department of Taxation</p> <p>1550 College Pkwy Ste 115 Carson City NV 89706</p> <p>Premium@tax.state.nv.us.</p> <p>Premium Tax Forms</p> <p>Catives@doi.nv.gov.</p>
	E	<p>Delivery Instructions:</p> <p>Does not apply to Individuals/ agencies/ entities Licensed under NRS 683A or NRS 692</p> <p>Filings Must be Legible</p>	<p>The due date is March 1st. The Division will consider 2020 filings and payments postmarked on or before March 1st as being submitted timely.</p> <p>1. Send Annual Renewal Payments to the Nevada Division of Insurance Carson City office – See “C”</p>

			<p>2. Send Annual Renewal Payments to the Nevada Division of Insurance Carson City office – See “C”</p> <p>3. File Required Industry Reports through <u>SERFF</u> or mail to Life/Health or Property/Casualty section. See “Q”</p>
	F	Late Filings:	<p>3. File Required Industry Reports through <u>SERFF</u> or mail to Life/Health or Property/Casualty section. See “Q”</p>
	G	Original Signatures:	<p>Domestic companies: original signatures are required on all filings.</p> <p>Foreign companies: follow NAIC Annual Statement Instructions.</p>
	H	Signature/Notarization/Certification:	<p>The President and Secretary are required to sign the annual statement, or, in the absence of one, two other principal officers may sign.</p>
	I	Amended Filings:	<p>Domestic companies: file within 10 days of amendment and include an explanation of the amendment(s). Signature requirements listed apply to any amendment. See “G”</p> <p>Domestic companies: file within 10 days of amendment and include an explanation of the amendment(s). Signature requirements listed apply to any amendment. See “G”</p>
	J	Exceptions from normal filings:	<p>Domestic companies: file within 10 days of amendment and include an explanation of the amendment(s). Signature requirements listed apply to any amendment. See “G”</p> <p>Foreign companies: file only for Nevada required filings - supply a written copy of any exemption or extension received from your state of domicile at least 10 days prior to the filing due date.</p>
	K	Bar Codes (State or NAIC):	Follow the instructions in the NAIC Annual Statement Instructions.

	L	Signed Jurat:	<p>Foreign Companies: Do Not File Jurat Page. Do Not Send hard copy of Annual Statement, if Annual Statement is filed with the state of domicile and electronically with the NAIC.</p> <p>Domestic companies: The submitted Jurat page must be signed, and filed electronically with your assigned DOI analyst. See "B" for mailing instructions.</p>
	M	NONE Filings:	All pages must be included. "None Page" allowed.
	N	Filings new, discontinued or modified materially since last year:	<p>Modified: Domestic companies: The submitted filings must be signed, and filed electronically with your assigned DOI analyst.</p> <p>See "R" for additional notes.</p>
	O		
	P		
	Q		
	R		
	S		

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.

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