LIFE, ACCIDENT AND HEALTH/FRATERNAL INSURERS

COMPANY NAME:		NAIC Company	Code:			
Contact:		Telephone:				
REQUIRED FILINGS IN THE STATE OF:	Massachusetts	Filing	s Made During the	Year 2020		
FRATERNAL COMPANIES BEGIN FILING LIFE/FRATERNAL STATEMENT EFFECTIVE WITH FIRST QUARTER, 2019.						

(1)	(2)	(3)	(4)			(5)	(6)	(7) APPLICABLE NOTES
Checklist Lin	Line #	# REQUIRED FILINGS FOR THE ABOVE STATE		NUMBER OF COPIES* Domestic Foreign		DUE DATE	FORM SOURCE**	
			State	NAIC	State		BOCKEL	NOTES
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 ½"x14")	1	EO	XXX	3/2	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E29)	1	EO	XXX	3/2	NAIC	
	2	Quarterly Financial Statement (8 ½" x 14")	1	EO	XXX	5/15, 8/17, 11/16	NAIC	
	3	Separate Accounts Annual Statement (8 ½"x14")	1	EO	XXX	3/2	NAIC	
		•						
		II. NAIC SUPPLEMENTS				Į.		
	11	Accident & Health Policy Experience Exhibit	1	EO	XXX	4/1	NAIC	
	12	Credit Insurance Experience Exhibit (excludes	1			., -		
	12	Fraternal)	1	EO	XXX	4/1	NAIC	Instruction J
	13	Life, Health & Annuity Guaranty Assessment Base						
		Reconciliation Exhibit (excludes Fraternal)	1	EO	XXX	4/1	NAIC	Instruction J
	14	Life, Health & Annuity Guaranty Assessment Base						
		Reconciliation Exhibit Adjustment Form (excludes						
		Fraternal)	1	EO	XXX	4/1	NAIC	Instruction J
	15	Long-term Care Experience Reporting Forms	1	EO	XXX	4/1	NAIC	
	16	Management Discussion & Analysis	1	EO		4/1	Company	
	17	Medicare Supplement Insurance Experience Exhibit	1	EO	XXX	3/2	NAIC	
	18	Medicare Part D Coverage Supplement				3/2, 5/15, 8/17,		
	10	Wedicare Fair D Coverage Supplement	1	EO	XXX	11/16	NAIC	
	19	Risk-Based Capital Report	1	EO	XXX	3/2	NAIC	
	20	Schedule SIS (excludes Fraternal)	1	N/A	N/A	3/2	NAIC	Instruction J
	21	Supplemental Compensation Exhibit	1	N/A	N/A	3/2	NAIC	See Note 1
	22	Supplemental Health Care Exhibit (Parts 1, 2 and 3)	1	EO	XXX	4/1	NAIC	
	23	Supplemental Health Care Exhibit's Allocation Report	1	EO	XXX	4/1	NAIC	
	24	Supplemental Investment Risk Interrogatories	1	EO		4/1	NAIC	
	25	Supplemental Schedule O (excludes Fraternal)	1	EO	XXX	3/2	NAIC	Instruction J
	26	Supplemental Term and Universal Life Insurance	1	EO	XXX	3/2	NAIC	mstruction 3
	20	Reinsurance Exhibit	1	EO	VVV	4/1	NAIC	
	27	Trusteed Surplus Statement	1	EO	XXX	3/2, 5/15, 8/17,	NAIC	
	21	Trusteed Surpius Statement	0	EO	vvv	11/16	NAIC	
	28	Variable Annuities Supplement	1	EO	XXX	4/1	NAIC	
	29		1	EO	XXX	3/2	NAIC	
		VM 20 Reserves Supplement		EU	XXX	3/2	NAIC	Instruction
	30	Workers' Compensation Carve-Out Supplement	1	EO		3/2	NAIC	J
		(excludes Fraternal)		EU	XXX	3/2	NAIC	,
	2.1	Actuarial Related Items			i	1		1
	31	Actuarial Certification regarding use 2001 Preferred		F-0		2/2		
	22	Class Table	1	EO	XXX	3/2	Company	
	32	Actuarial Certification Related Annuity Nonforfeiture		F0		2/2	C	
	22	Ongoing Compliance for Equity Indexed Annuities	1	EO	XXX	3/2	Company	
	33	Actuarial Certification Related to Hedging required by		F0		2/2	C	
	2.4	Actuarial Guideline XLIII	1	EO	XXX	3/2	Company	
	34	Actuarial Certification Related to Reserves required		F-0		2/2		
	25	by Actuarial Guideline XLIII	1	EO	XXX	3/2	Company	
	35	Actuarial Memorandum Related to Universal Life						
		with Secondary Guarantee Policies required by	1	NT/A		4/20	C	
	20	Actuarial Guideline XXXVIII 8D	1	N/A	XXX	4/30	Company	
	36	Actuarial Opinion	1	EO	XXX	3/2	Company	
	37	Executive Summary of the PBR Actuarial Report (if	1	NT/A		4/1	Co	
	20	VM early adopted)	1	N/A	XXX	4/1	Company	
	38	Actuarial Opinion on Separate Accounts Funding		F0		2/2	G	
	20	Guaranteed Minimum Benefit	1	EO	XXX	3/2	Company	
	39	Actuarial Opinion on Synthetic Guaranteed				2/2		
	40	Investment Contracts	1	EO	XXX	3/2	Company	
	40	Actuarial Opinion on X-Factors	1	EO	XXX	3/2	Company	
	41	Actuarial Opinion required by Modified Guaranteed	_			2/2		
		Annuity Model Regulation	1	EO	XXX	3/2	Company	

(1)	(2)	(3)		(4)		(5)	(6)	(7)
Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	NUMBER OF COPIES* Domestic Foreign		DUE DATE	FORM SOURCE**	APPLICABLE NOTES	
Checkinst	Zine "	ALQUIALD TILLINGS FOR TILL THE TEXT	State	NAIC	State	20222	BOOKEL	NOTES
	42	Financial Officer Certification Related to Clearly						
		Defined Hedging Strategy required by Actuarial	1			0.00		
	10	Guideline XLIII		EO	XXX	3/2	Company	
	43	Life PBR Exemption (formerly Companywide Exemption)	1	E/O	xxx	Commissioner 7/1 NAIC 8/17	Company	
	44	Management Certification that the Valuation Reflects	1	L/O	ΑΛΛ	//1 NAIC 6/17	Company	
	7-7	Management's Intent required by Actuarial Guideline	1					
		XLIII	_	EO	XXX	3/2	Company	
	45	RAAIS required by Valuation Manual	1	N/A	XXX	4/1	Company	
	46	Reasonableness & Consistency of Assumptions				3/2,5/15, 8/17,		
		Certification required by Actuarial Guideline XXXV	1	EO	XXX	11/16	Company	
	47	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	1	EO		3/2,5/15, 8/17,	C	
	48	Reasonableness & Consistency of Assumptions	1	EU	XXX	11/16	Company	
	40	Certification required by Actuarial Guideline XXXVI	1			3/2,5/15, 8/17,		
		(Updated Average Market Value)	1	EO	XXX	11/16	Company	
	49	Reasonableness & Consistency of Assumptions						
		Certification required by Actuarial Guideline XXXVI	1			3/2,5/15, 8/17,		
		(Updated Market Value)		EO	XXX	11/16	Company	
	50	Reasonableness of Assumptions Certification for						
		Implied Guaranteed Rate Method required by	1			3/2,5/15, 8/17,		
		Actuarial Guideline XXXVI		EO	XXX	11/16	Company	
	51	RBC Certification required under C-3 Phase I	1	EO	XXX	3/2	Company	
	52	RBC Certification required under C-3 Phase II	1	EO	XXX	3/2	Company	
	53	Statement on non-guaranteed elements - Exhibit 5 Int. #3	1	EO	xxx	3/2	Company	
	54	Statement on par/non-par policies – Exhibit 5 Int. 1&2	1	EO	XXX	3/2	Company	
	J -	Statement on pai/non-pai poneres – Exmort 3 mt. 162	1	LO	ΛΛΛ	3/2	Company	
		III. ELECTRONIC FILING REQUIREMENTS		I	I		l	ı
	61	Annual Statement Electronic Filing	XXX	EO	XXX	3/2	NAIC	
	62	March .PDF Filing	XXX	EO	XXX	3/2	NAIC	
	63	Risk-Based Capital Electronic Filing	XXX	EO	N/A	3/2	NAIC	
	64	Risk-Based Capital .PDF Filing	XXX	EO	N/A	3/2	NAIC	
	65	Separate Accounts Electronic Filing	XXX	EO	XXX	3/2	NAIC	
	66	Separate Accounts .PDF Filing	XXX	EO	XXX	3/2	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, 8/17, 11/16	NAIC	
	70	Quarterly .PDF Filing	XXX	EO	XXX	5/15, 8/17, 11/16	NAIC	
	71	June .PDF Filing	XXX	EO	XXX	6/1	NAIC	
		IV. AUDIT/INTERNAL						
	0.1	CONTROL RELATED REPORTS	1	FO	DT/A	C/1	C	1
	81 82	Accountants Letter of Qualifications Audited Financial Reports	1	EO EO	N/A	6/1	Company Company	
	82	Audited Financial Reports Audited Financial Reports Exemption Affidavit	1	N/A	XXX N/A	0/1	1 ,	-
	84	Communication of Internal Control Related Matters	1	1 N /A	1 N /A		Company	
	0+	Noted in Audit	1	EO	N/A	8/3	Company	
	85	Independent CPA (change)	1	N/A	N/A	6/1	Company	
	86	Management's Report of Internal Control Over	_					1
		Financial Reporting	1	N/A	N/A	8/3	Company	
	87	Notification of Adverse Financial Condition	1	N/A	N/A	6/1	Company	
	88	Relief from the five-year rotation requirement for lead						
		audit partner	1	EO	XXX	3/2	Company	
	89	Relief from the one-year cooling off period for						<u> </u>
		independent CPA	1	EO	XXX	3/2	Company	
	90	Relief from the Requirements for Audit Committees	1	EO	XXX	3/2	Company	
	91	Request for Exemption to File Management's Report		3 . T / ▲	}. T / ▲	2/2	C-	
		of Internal Control Over Financial Reporting	1	N/A	N/A	3/2	Company	
		V CTATE DECLUDED EN INCC						<u> </u>
	101	V. STATE REQUIRED FILINGS	1	0	0	6/1	Co	1
	101	Corporate Governance Annual Disclosure***	1	0	0	6/1	Company	1
	102	Filings Checklist (with Column 1 completed)	0	U	0		State	See Note 7
	103	Form B-Holding Company Registration Statement						and
	103	(excludes Fraternal)	1	0	1	5/1	Company	Instruction J
	1	(e.tetadeo i internut)	1 1		1	U, 1	Company	

(1)	(2)	(3)	NUM	(4) BER OF CO	PIES*	(5)	(6) FORM	(7) APPLICABLE
Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	Dome	estic	Foreign	DUE DATE	SOURCE**	NOTES
			State	NAIC	State			
	104	Form F-Enterprise Risk Report (excludes Fraternal)****	1	0	N/A	5/1	Company	See Note 7 and Instruction J
	105	ORSA (excludes Fraternal)*****	1 (If req'd)	0	0		Company	See Notes & Instruction J,O
	106	Premium Tax	@@@	0	@@@		State	See Note 2
	107	State Filing Fees	0	0	1	3/2	State	See Note 3
	108	Signed Jurat	XXX	0	1	3/2	NAIC	See Note 8
	109	Claims in Suit (excludes Fraternal)	1	0	1	3/2	Company	See Note 4, Instruction J
	110	Form AR-1	0	0	1	3/2	State	See Note 5
	111	Holding Company Registration Statement Affidavit	0	0	1	3/2	Company	See Note 7
	112	License Renewal Application	0	0	1	3/2	State	See Note 3

^{*}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 @@@ appears in this column, please refer to the 2019 Filing Checklist Notes.

****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

^{**}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.

	NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
A	Required Filings Contact Person:	Financial Surveillance / Company Licensing Telephone: 617-521-7794 or companies.mailbox@mass.gov
В	Mailing Address:	Commonwealth of Massachusetts Division of Insurance Company Licensing Section 1000 Washington Street, Suite 810 Boston, MA 02118-6200
С	Mailing Address for Filing Fees:	Massachusetts Division of Insurance Annual Filing Fee / Company License Renewal PO Box 370039 Boston, MA 02241-0739
D	Mailing Address for Premium Tax Payments:	Commissioner of Revenue Audit Division Banking and Insurance Unit PO Box 7052 Boston, MA 02204 Telephone: 617-887-6710
Е	Delivery Instructions:	Massachusetts General Laws, Chapter 175, Section 25 requires that the Annual Statement be received on or before March 2, 2020. All schedules due on that date must be securely attached to the appropriate pages or bound separately.
F	Late Filings:	Massachusetts General Laws, Chapter 175, Section 26 provides for a penalty of \$100 per day if the Annual Statement, or any other related filings, are not received in the proper form and by the date required. In addition, any company that neglects to file in the proper form and by the date required may be required to cease writing new business as long as this deficiency continues.
G	Original Signatures:	Original notarized signatures of at least two principal officers of the company.
Н	Signature/Notarization/Certification:	Annual Statements must be subscribed and sworn before a notary by at least two principal officers of the company.
I	Amended Filings:	
J	Exceptions from normal filings:	Filings are not required for Fraternal Insurers.
K	Bar Codes (State or NAIC):	Please follow the instruction in the NAIC Annual Statement Instructions.
L	Signed Jurat:	In lieu of printed copies of annual statements, Massachusetts requires foreign life, accident and health insurers to file a signed jurat page.

M	NONE Filings:	Please follow the instructions in the NAIC Annual Statement Instructions.
N	Filings new, discontinued or modified materially since last year:	Removal of three supplements: Line 12, 13 and 15 from 2018 checklist.
О	ORSA Filings:	To be filed if Massachusetts is the Lead State.

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 2, 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 2.

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