

LIFE, ACCIDENT AND HEALTH INSURERS

COMPANY NAME: _____ NAIC Company Code: _____

Contact: _____ Telephone: _____

REQUIRED FILINGS IN THE STATE OF: COLORADO 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	State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 1/2"x14")	PDF	EO	xxx	3/1	NAIC	U
	1.1	Printed Investment Schedule detail (Pages E01-E27)	PDF	EO	xxx	3/1	NAIC	U
	2	Quarterly Financial Statement (8 1/2" x 14")	PDF	EO	xxx	5/15, 8/15, 11/15	NAIC	U
	3	Separate Accounts Annual Statement (8 1/2"x14")	PDF	EO	xxx	3/1	NAIC	U
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	PDF	EO	xxx	4/1	NAIC	U
	11	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	PDF	EO	xxx	3/1	Company	U
	12	Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII	PDF	EO	xxx	3/1	Company	U
	13	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	PDF	EO	xxx	3/1	Company	U
	14	Actuarial Certification regarding use 2001 Preferred Class Table	PDF	EO	xxx	3/1	Company	N , U
	15	Actuarial Opinion	PDF	EO	xxx	3/1	Company	J , U
	16	Actuarial Opinion on X-Factors	PDF	EO	xxx	3/1	Company	U
	17	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	PDF	EO	xxx	3/1	Company	U
	18	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	PDF	EO	xxx	3/1	Company	U
	19	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	PDF	EO	xxx	3/1	Company	U
	20	Analysis of Annuity Operations by Lines of Business	PDF	EO	xxx	4/1	NAIC	U
	21	Analysis of Increase in Annuity Reserves During Year	PDF	EO	xxx	4/1	NAIC	U
	22	Credit Insurance Experience Exhibit	PDF	EO	xxx	4/1	NAIC	U
	23	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	PDF	EO	xxx	3/1	Company	U
	24	Health Care Exhibit (Parts 1, 2 and 3) Supplement	PDF	EO	PDF(C)	4/1	NAIC	U
	25	Health Care Exhibit's Allocation Report Supplement	PDF	EO	xxx	4/1	NAIC	U
	26	Interest Sensitive Life Insurance Products Report	PDF	EO	xxx	4/1	NAIC	U
	27	Investment Risk Interrogatories	PDF	EO	xxx	4/1	NAIC	U
	28	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit	PDF	EO	xxx	4/1	NAIC	U
	29	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit Adjustment Form	PDF	EO	xxx	4/1	NAIC	U
	30	Long-term Care Experience Reporting Forms	PDF	EO	xxx	4/1	NAIC	U
	31	Management Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII	PDF	EO	xxx	3/1	Company	U
	32	Management Discussion & Analysis	PDF	EO	xxx	4/1	Company	R , U
	33	Medicare Supplement Insurance Experience Exhibit	PDF	EO	xxx	3/1	NAIC	U
	34	Medicare Part D Coverage Supplement	PDF	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	U
	35	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	PDF	EO	xxx	3/1,5/15, 8/15, 11/15	Company	U
	36	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	PDF	EO	xxx	3/1,5/15, 8/15, 11/15	Company	U
	37	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	PDF	EO	xxx	3/1,5/15, 8/15, 11/15	Company	U
	38	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	PDF	EO	xxx	3/1,5/15, 8/15, 11/15	Company	U
	39	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	PDF	EO	xxx	3/1,5/15, 8/15, 11/15	Company	U
	40	Risk-Based Capital Report	PDF	EO	xxx	3/1	NAIC	U
	41	RBC Certification required under C-3 Phase I	PDF	EO	xxx	3/1	Company	U
	42	RBC Certification required under C-3 Phase II	PDF	EO	xxx	3/1	Company	U
	43	Schedule SIS	PDF	N/A	N/A	3/1	NAIC	U
	44	Statement on non-guaranteed elements - Exhibit 5 Int. #3	PDF	EO	xxx	3/1	Company	U
	45	Statement on par/non-par policies - Exhibit 5 Int. 1&2	PDF	EO	xxx	3/1	Company	U

46	Supplemental Compensation Exhibit	PDF	N/A	PDF	3/1	NAIC	U
47	Supplemental Schedule O	PDF	EO	xxx	3/1	NAIC	U
48	Trusteed Surplus Statement	PDF	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	U
49	Workers' Compensation Carve Out Supplement	PDF	EO	xxx	3/1	NAIC	U
III. ELECTRONIC FILING REQUIREMENTS							
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	Separate Accounts Electronic Filing	xxx	1	xxx	3/1	NAIC	
55	Separate Accounts .PDF Filing	xxx	1	xxx	3/1	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	
IV. AUDIT/INTERNAL CONTROL RELATED REPORTS							
71	Accountants Letter of Qualifications	PDF	EO	N/A	6/1	Company	P, J, U
72	Audited Financial Reports	PDF	EO	xxx	6/1	Company	P, J, U
73	Audited Financial Reports Exemption Affidavit	PDF	N/A	N/A		Company	P, U
74	Communication of Internal Control Related Matters Noted in Audit	PDF	N/A	N/A	8/1	Company	P, U
75	Independent CPA (change)	PDF	N/A	N/A		Company	P, U
76	Management's Report of Internal Control Over Financial Reporting	PDF	N/A	N/A	8/1	Company	P, U
77	Notification of Adverse Financial Condition	PDF	N/A	N/A		Company	P, U
78	Request for Exemption to File	PDF	N/A	N/A	12/31	Company	P, U
79	Relief from the five-year rotation requirement for lead audit partner	PDF	EO	N/A	3/1	Company	P, U, N
80	Relief from the one-year cooling off period for independent CPA	PDF	EO	N/A	3/1	Company	P, U, N
81	Relief from the Requirements for Audit Committees	PDF	EO	N/A	3/1	Company	P, U, N
V. STATE REQUIRED FILINGS							
101	Premium Tax	1	0	1	3/1	State	D
102	Signed Jurat	PDF	xxx	PDF	3/1	NAIC	L, U
103	Summary of Anti-Fraud Plan	PDF	0	PDF	3/1	Company	U
104	MGA Questionnaire	PDF	0	0	3/1	State	U
105	Uniform Consent to Service Process (For Changes Only)	1	0	1	See Note O	State	O
106	Synopsis of Annual Statement Publication (FORM S)	1	0	1	3/1	State	S
107	Holding Company Registration Statement	PDF	0	0	See Note Q	Company	Q, U
108	Quarterly Variance Report (Health Blank Only)	PDF	0	0	5/15, 8/15, 11/15	Company	V, U
109	Regulatory Asset Adequacy Issues Summary (RAAIS)	PDF	0	0	3/15	Company	U

*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.

PDF - This document is filed in an electronic .PDF format only – NO HARDCOPIES ARE REQUIRED, NOR WILL THEY BE ACCEPTED

PDF(C) – Foreign companies file this document showing Colorado Business Only

		NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
	A	Required Filings Contact Person:	<p>Financial Filings:</p> <p>Scott Lloyd 303-894-7537 E-mail: scott.lloyd@dora.state.co.us</p> <p>Premium Tax Filings:</p> <p>Suzy Birmingham 303-894-7542 E-mail: sbirmingham@dora.state.co.us</p> <p>Forms are available on the Division of Insurance Website at: http://www.dora.state.co.us/insurance/annual/filing.htm</p>
	B	Mailing Address:	Filings must be emailed in electronic .PDF format to: doi.financialaffairs@dora.state.co.us
	C	Mailing Address for Form F: (HMO and Fraternal Only)	Cash Management Colorado Division of Insurance 1560 Broadway, Suite 850 Denver, CO 80202
	D	Filing and payment of annual fee, fraud fee and premium taxes:	Link to online premium tax filing/ACH payment: https://www.dora.state.co.us/pls/real/opt.logon
		<ul style="list-style-type: none"> • Via Email – for electronic Schedule T filing 	Schedule T may be emailed in electronic .PDF format to: doi.corporateaffairs@dora.state.co.us
		<ul style="list-style-type: none"> • Via U.S. Postal Service <p>Note: Only payment coupons, Schedule T, and payments to this address.</p>	Colorado Division of Insurance – Premium Tax PO Box 2237 Englewood, CO 80150-2237
		<ul style="list-style-type: none"> • Via Courier or Express Service: <p>Note: Only payment coupons, Schedule T, and payments go this address.</p>	Colorado Division of Insurance – Premium Tax First Data Payment Services Lockbox 6200 South Quebec Street, Suite 160 Greenwood Village, Colorado 80111
	E	Delivery Instructions:	All required filings per checklist must be received no later than the due date. If the due date falls on a weekend or holiday, the deadline is extended to the next business day. Filings must be emailed in electronic .PDF format to: doi.financialaffairs@dora.state.co.us
	F	Late Filings:	Up to \$100 per day late filing penalty. Up to \$100 per day late penalty for premium tax payments.
	G	Original Signatures:	Original signatures are required and must appear on the PDF filing.
	H	Signature/Notarization/Certification:	Notarized signatures are required for chief officers and must appear on the PDF filing.
	I	Amended Filings:	Amended filings must be filed with both the Division and the NAIC and signed similarly to the originals.
	J	Exceptions from normal filings:	Audited Financial Statements (Extensions) –10 days prior to due date; Actuarial Opinions (Extensions /Exemptions) –15 days prior to due date; requests considered on a case-by-case basis.
	K	Bar Codes (State or NAIC):	Please follow the NAIC Annual Statement Instructions.

L	Signed Jurat:	Foreign companies must file this page. (For Annual filing only). Filings must be emailed in electronic .PDF format to: doi.financialaffairs@dora.state.co.us
M	NONE Filings:	See NAIC Annual Statement Instructions for Supplement Interrogatories. Exceptions to these instructions are noted on the form.
N	Filings new, discontinued or modified materially since last year:	New: <ol style="list-style-type: none"> 1. Actuarial Certification regarding use 2001 Preferred Class Table 2. Relief from the five-year rotation requirement for lead audit partner 3. Relief from the one-year cooling off period for independent CPA 4. Relief from the Requirements for Audit Committees Discontinued: <ol style="list-style-type: none"> 1. Report of Significant Deficiencies in Internal Controls Materially Modified: <ol style="list-style-type: none"> 1. None
O	Uniform Consent to Service Process (UCAA Form 12)	ONLY COMPANIES THAT HAVE CHANGED THEIR COLORADO REPRESENTATIVE FOR SERVICE OF PROCESS MUST COMPLETE THIS FORM. File under separate cover directly to: Colorado Division of Insurance Attn: Christine Gonzales-Ferrer 1560 Broadway, Suite 850 Denver, CO 80202 Form available on DOI website at: http://www.dora.state.co.us/insurance/industry/servproc.htm Direct questions to: Christine Gonzales-Ferrer E-mail: christine.gonzales-ferrer@dora.state.co.us
P	Audited Financial Statements	Refer to Colorado Regulation 3-1-4, which is available on the state of Colorado website: http://www.dora.state.co.us/insurance/regs/F3-1-4_1109.pdf

Q	Holding Company Registration Statement	Forms B & C due within 120 days of the ultimate controlling person's fiscal year end. (i.e., For fiscal year end 12/31, the due date is 4/30.) Refer to Colorado Regulation 3-4-1, which is available on the state of Colorado website. http://www.dora.state.co.us/insurance/regs/3-4-1.pdf
R	Management Discussion and Analysis Form:	Follow the NAIC Annual Statement Instructions for completing this filing.
S	Synopsis of Annual Statement Publication (FORM S)	Required pursuant to §10-3-109(1), C.R.S RETURN THIS COMPLETED FORM DIRECTLY TO THE SELECTED NEWSPAPER.
T	NOT USED	
U	Electronic .PDF filing	Filings must be emailed in electronic .PDF format to: doi.financialaffairs@dora.state.co.us The electronic PDF filing must have the Company Name, NAIC Number and Type of Document in the subject line. Please send one attachment per email (subject line example: ABC Insurance Company – 12345 - Annual statement). Note: If this is not in the subject line, the email may be deleted.
V	Quarterly Variance Report (For Health Blank Only)	See: www.dora.state.co.us/insurance/annual/qvr.xls

**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 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 *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 before submitting a filing.