LIFE, ACCIDENT AND HEALTH INSURERS

COMPANY NAME:_____**NAIC Company Code:**_____

Contact:_____**Telephone:** _____

REQUIRED FILINGS IN THE STATE OF: __CONNECTICUT_____ Filings Made During the Year 2010

(1) Check-list	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES* Domestic State	Domestic NAIC	Foreign State	(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 ½"x14")	2	EO	xxx	3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E27)	2	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	2	Quarterly Financial Statement (8 ½" x 14")	2	EO	xxx	5/15, 8/15, 11/15	NAIC	
	3	Separate Accounts Annual Statement (8 ½"x14")	2	EO	xxx	3/1	NAIC	
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	2	EO	xxx	4/1	NAIC	
	11	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	2	EO	xxx	3/1	Company	
	12	Actuarial Opinion on X-Factors	2	EO	xxx	3/1	Company	
	13	Actuarial Opinion on Separate Accounts Funding	2	EO	xxx	3/1	Company	
	14	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	2	EO	xxx	3/1	Company	
	15	Credit Insurance Experience Exhibit	2	EO	xxx	4/1	NAIC	
	16	Interest Sensitive Life Insurance Products Report	2	EO	xxx	4/1	NAIC	
	17	Investment Risk Interrogatories	2	EO	xxx	4/1	NAIC	
	18	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit	2	EO	xxx	4/1	NAIC	
	19	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit Adjustment Form	2	EO	xxx	4/1	NAIC	
	20	Long-term Care Experience Reporting Forms	2	EO	xxx	4/1	NAIC	
	21	Management Discussion & Analysis	2	EO	xxx	4/1	Company	
	22	Medicare Supplement Insurance Experience Exhibit	2	EO	xxx	3/1	NAIC	
	23	Medicare Part D Coverage Supplement	2	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	24	Reasonableness of Assumptions Certification	2	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	25	Reasonableness & Consistency of Assumptions Cert.	2	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	26	Reasonableness of Assumptions Cert. for Implied Guaranteed Rate Method	2	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	27	Reasonableness & Consistency of Assumptions Cert. (Updated Average Market Value)	2	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	28	Reasonableness & Consistency of Assumptions Cert. (Updated Market Value)	2	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	29	Risk-Based Capital Report	1	EO	xxx	3/1	NAIC	
	30	RBC Certification required under C-3 Phase I	1	EO	xxx	3/1	Company	
	31	RBC Certification required under C-3 Phase II	1	EO	xxx	3/1	Company	
	32	Schedule SIS	2	N/A	N/A	3/1	NAIC	
	33	Statement of Actuarial Opinion	2	EO	xxx	3/1	Company	
	34	Statement on non-guaranteed elements - Exhibit 5 Int. #3	2	EO	xxx	3/1	Company	
	35	Statement on par/non-par policies – Exhibit 5 Int. 1.1	2	EO	xxx	3/1	Company	
	36	Supplemental Compensation Exhibit	2	N/A	N/A	3/1	NAIC	"Q"
	37	Supplemental Schedule O	2	EO	xxx	3/1	NAIC	
	38	Trusteed Surplus Statement	2	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	39	Workers' Compensation Carve Out Supplement	2	EO	xxx	3/1	NAIC	
		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. AUDITED FINANCIAL STATEMENTS						
	71	Accountants Letter of Qualifications	1	EO	N/A	6/1	Company	
	72	Audited Financial Statements	1	EO	xxx	6/1	Company	
	73	Audited Financial Statements Exemption Affidavit	0	N/A	N/A		Company	
	74	Independent CPA	1	N/A	N/A	Within 60 days of becoming subject to such requirements	Company	
	75	Notification of Adverse Financial Condition	1	N/A	1	Within 5 business days of company notification	Company	
	76	Communication of Internal Control Related Matters: No unremediated material weaknesses	1	N/A	1	6/1	Company	
	76a	Communication of Internal Control Related Matters: Unremediated material weaknesses	1	N/A	1	Within 60 days after the filing of the annual audited financial report	Company	
	77	Request for Exemption to File	1	N/A	N/A	12/31	Company	

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		V. STATE REQUIRED FILINGS						
	101	Filings Checklist (with Column 1 completed)	2	0	1	3/1, 5/15, 8/15, 11/15	State	"T"
	102	Retention of Assets Statement	2	0	0	3/1	State	
	103	Accident & Health Advertising Certificate of Compliance	2	0	1	3/1	Company	"O"
	104	Holding Company Registration Statement	1	0	N/A	6/1	State	
	105	Regulatory Asset Adequacy Issues Summary (RAAIS)	2	0	0	3/15	Company	"V"
	106	Separate Account Investment Certification	2	0	0	3/1	Company	"R"
	107	Actuarial Certification required under VACARVM	2	0	0	3/1	Company	"W"

***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.**

		NOTES AND INSTRUCTIONS (A-N APPLY TO ALL FILINGS)	
	A	**Required Filings Contact Person:**	Financial Analysis & Compliance Division (860) 297-3814 E-Mail – ctinsdept.financial@ct.gov
	B	**Mailing Address:**	Connecticut Insurance Department P.O. Box 816 Hartford, CT 06142-0816 **EXPRESS/HAND DELIVERY**: Connecticut Insurance Department 153 Market Street Hartford, CT 06103
	C	**Mailing Address for Filing Fees:**	Same as above - Checks should be made payable to Treasurer, State of Connecticut. Department will invoice companies for appropriate fees; please **do not** send fees with annual/quarterly filings.
	D	**Mailing Address for Premium Tax Payments:**	Connecticut Department of Revenue Services P.O. Box 2990 Hartford, CT 06104-2990 (860) 541-3226
	E	**Delivery Instructions:**	**Domestic Company's** filings sent by the United States Postal Service must be postmarked no later than the indicated due date. Filings sent by a private delivery service will be considered filed on the date physically received by the Department. **Foreign Companies** must submit an electronically filed report with the NAIC and any required hard copy submission to the Department by the due date. Refer to Connecticut Bulletin FS-16-08. **If the filing date falls on a Saturday and the statements are sent via the United States Postal Service they must be post marked no later than this date. If sent via private delivery service they are due to the Department on the prior Friday. Sunday due dates will automatically be the following Monday.**
	F	**Late Filings:**	Companies will be fined $175 per day ($100 per day for fraternal societies) for a late annual statement or quarterly statement filing regardless of state of domicile approval.
	G	**Original Signatures:**	Original signatures are required on all filings from domestic companies. Foreign companies should follow the NAIC Annual Statement Instructions.
	H	**Signature/Notarization/Certification:**	The following officers are required to sign the annual/quarterly statements: President or Vice President, AND Secretary or Assistant Secretary Statements must also be notarized.
	I	**Amended Filings:**	Domestic companies are instructed to refer to Connecticut General Statute §38a-53a.
	J	**Exceptions from normal filings:**	Please follow the NAIC Annual Statement Instructions
	K	**Bar Codes (State or NAIC):**	Please follow the NAIC Annual Statement Instructions
	L	**Signed Jurat:**	Foreign companies filing electronically with the NAIC are not required to submit a hard copy.
	M	**NONE Filings:**	Please follow the NAIC Annual Statement Instructions
	N	**Filings new, discontinued or modified materially since last year:**	None of the filings have been discontinued since last year. New filings this year are the Bail Bond Supplement, RAAIS Summary, and Actuarial Certification for VACARVM.
	O	**Accident & Health Advertising Certificate of Compliance:**	Companies are referred to §38a-819-18(B) of the Regulations of Connecticut State Agencies for further details. Certificates only required for companies reporting accident and health premiums.
	P	**State Page – Quarterly Supplement Property & Casualty Companies:**	Both domestic and foreign companies are required to file with each quarterly statement a hard copy of page 20 of the annual statement reflecting the quarterly data.
	Q	**Supplemental Compensation Exhibit – Domestic Companies Only:**	If Connecticut General Statute section 38a-69a(b) is applicable to your Company the exhibit will be held confidential if you attach an affidavit to a copy of the exhibit showing only the three most highly compensated officers attesting that the Company is a nonprofit insurer and has fewer than 150 employees. This affidavit and redacted exhibit will be available for public inspection.
	R	**Separate Account Investment Certification – Domestic Companies Only:**	Officer compliance certification with C.G.S. 38a-102c as it relates to separate account guarantees. Refer to C.G.S. section 38a-102(d).
	S	**Actuarial Opinion Summary – Property & Casualty Companies:**	This is a confidential filing and should be sent under separate cover.
	T	**Filing Checklist:**	A checklist with column 1 completed is required to be submitted with all required hard copy filings.
	U	**Bail Bond Supplement - Property & Casualty Companies:**	Supplement to be filed with State of Domicile and NAIC for reporting entities writing bail bond coverage.
	V	**Regulatory Asset Adequacy Issues Summary (RAAIS) – Domestic Life and Fraternal Societies:**	This is a confidential filing required by section 38a-78-9(a)(5) of the Regulations of Connecticut State Agencies and should be sent under separate cover.
	W	**Actuarial Certification required under VACARVM – Domestic Life Companies Only:**	Actuarial Certification required under Actuarial Guideline XLIII

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.