

FRATERNAL SOCIETIES

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

Contact: _____ **Telephone:** _____

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

(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")	2	EO	xxx	3/1	NAIC	See Notes E,F&L
	1.1	Printed Investment Schedule detail (Pages E01-E27)	2	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	2	EO	xxx	5/15, 8/15, 11/15	NAIC	See Note M
	3	Separate Accounts Annual Statement (8 1/2"x 14")	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	Interest Sensitive Life Insurance Products Report	2	EO	xxx	4/1	NAIC	
	16	Investment Risk Interrogatories	2	EO	xxx	4/1	NAIC	
	17	Long Term Care Experience Reporting Forms	2	EO	xxx	4/1	NAIC	
	18	Management Discussion & Analysis	2	EO	xxx	4/1	Company	
	19	Medicare Supplement Insurance Experience Exhibit	2	EO	xxx	3/1	NAIC	
	20	Medicare Part D Coverage Supplement	2	EO	xxx	3/1 ,5/15, 8/15, 11/15	NAIC	
	21	Reasonableness of Assumptions Certification	2	EO	xxx	5/15, 8/15, 11/15	Company	
	22	Reasonableness & Consistency of Assumptions Cert.	2	EO	xxx	5/15, 8/15, 11/15	Company	
	23	Reasonableness of Assumptions Cert. for Implied Guaranteed Rate Method	2	EO	xxx	5/15, 8/15, 11/15	Company	
	24	Reasonableness & Consistency of Assumptions Cert. (Updated Average Market Value)	2	EO	xxx	5/15, 8/15, 11/15	Company	
	25	Reasonableness & Consistency of Assumptions Cert. (Updated Market Value)	2	EO	xxx	5/15, 8/15, 11/15	Company	
	26	Risk-Based Capital report	2	EO	xxx	3/1	NAIC	
	27	RBC Certification required under C-3 Phase I	2	EO	xxx	3/1	Company	
	28	RBC Certification required under C-3 Phase II	2	EO	xxx	3/1	Company	
	29	Statement of Actuarial Opinion	2	EO	xxx	3/1	Company	
	30	Statement on non-guaranteed elements-exhibit 5 Interr. #3	2	EO	xxx	3/1	Company	
	31	Statement on Participating/Non-participating Policies-exhibit 5, Interr. #1	2	EO	xxx	3/1		
	32	Supplemental Compensation Exhibit	2	N/A	N/A	3/1	NAIC	
	33	Trusted Surplus Statement	2	EO	xxx	3/1 ,5/15, 8/15, 11/15	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	Separate Accounts Electronic Filing	xxx	1	xxx	3/1	NAIC	
	53	Separate Accounts .PDF Filing	xxx	1	xxx	3/1	NAIC	
	54	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	
	55	Supplemental .PDF Filing	xxx	1	xxx	4/1	NAIC	
	56	Quarterly Statement Electronic Filing	xxx	1	xxx	5/15, 8/15 & 11/15	NAIC	
	57	Quarterly .PDF Filing	xxx	1	xxx	5/15, 8/15 & 11/15		
	58	June .PDF Filing	xxx	1	xxx	6/1	NAIC	
IV. AUDITED FINANCIAL STATEMENTS								
	71	Accountants Letter of Qualifications	2	EO	N/A		Company	
	72	Audited Financial Statements	2	EO	xxx	6/1	Company	
	73	Audited Financial Statements Exemption Affidavit	0	N/A	N/A		Company	
	74	Independent CPA	0	N/A	N/A		Company	
	75	Notification of Adverse Financial Condition	2	N/A	N/A		Company	
	76	Report of Significant Deficiencies in Internal Controls	2	N/A	N/A		Company	
	77	Request for Exemption to File	1	N/A	N/A		Company	
V. STATE REQUIRED FILINGS								
	101	Filings Checklist (with Column 1 completed)	1	0	xxx	3/1	State	
	102	Premium tax	1	0	1	3/31	State	
	103	State Filing Fees	1	0	1	1/31	State	See Note O
	104	Utah Accident & Health Survey	1	xxx	1	3/1	State	See Note N
	105	Holding Company Registration Form B&C	2	0	0	5/1	state	

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and the NAIC 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.

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

		NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
A	Required Filings Contact Person:		
		Financial Statements	Dan Applegarth (801)538-9509 dapplegarth@utah.gov
B	Mailing Address:		Utah Insurance Department State Office Building, RM 3110 Salt Lake City, Utah 84114-6901
C	Mailing Address for Filing Fees:		Same as above
D	Mailing Address for Premium Tax Payments:		K. Ray Hammond (801)297-3540 khammond@utah.gov Utah State Tax Commission 210North 1950West Salt Lake City, Utah 84134
E	Delivery Instructions:		All hardcopy filings must be postmarked no later than the indicated due date. If the due date falls on a weekend or holiday, then the deadline is extended to the next business day.
F	Late Filings:		Foreign company electronic filings will be deemed filed based on the date received by the NAIC. Domestic hardcopy filings will be deemed filed based on the postmark date.
G	Original Signatures:		Required for domestic companies.
H	Signature/Notarization/Certification:		Required for domestic companies.
I	Amended Filings:		To be submitted with cover letter and jurat page signed by top two officers.
J	Exceptions from normal filings: <i>Extensions and/or exemptions do apply to premium tax and fees</i>		Requests for extensions for a period of 30 days or less beyond the regular due date or exemptions, from filing the annual statement only, will not be required providing the domiciliary state has granted the extension or exemption and

			notified the NAIC. Extensions beyond 30 days will require written request for extension prior to expiration of the initial 30 day period, and domiciliary approval.
	K	Bar Codes (State or NAIC)	Not Required.
	L	Signed Jurat	Domestics-Original Signature, Notarization/Certification required.
	M	Quarterly Financial Statements	Domestics must file two printed statements.
	N	Utah Accident & Health Survey	All insurers who have accident & health business in Utah are required to file this survey (see website for more).
	O	State Filing Fees	See the fee Schedule Shown in Utah Administrative Code R590-102-5

**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 investments schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The *March .PDF Filing* is .pdf files for annual statement data, detail for investment schedules and supplements due March 1.

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 investment schedule detail.

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 supplements 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 (E) 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 (generally, on its website). 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.