## TITLE COMPANIES

COMPANY NAME:	NAIC Company Code:			
Contact:	Telephone:			
REQUIRED FILINGS IN THE STATE OF MONTANA	Filings Made During the Vear 2024			

(1)	(2)	(3)		(4)		(5)	(6)	(7)
(1)	(=)	(5)	NUMBER OF COPIES*		PIES*	(0)	FORM	APPLICABL
Checklis t	Line#	REQUIRED FILING FOR THE ABOVE STATE	Domestic		Foreig n	DUE DATE	SOURCE*	E NOTES
		STATE	State	NAIC	State	1		
		I. NAIC FINANCIAL STATEMENTS	State	NAIC	State			
	1	Annual Statement (8 ½" x 14")	1	ЕО	XXX	3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-		LO	AAA	3/1	THE	
		E29)	1	ЕО	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 ½" x 14")				5/15, 8/15,		
			1	EO	XXX	11/15	NAIC	
		II. NAIC SUPPLEMENTS			1	1	_	1 ~
	11	Actuarial Opinion	1	EO	XXX	3/1	Company	S
	12	Investment Risk Interrogatories	1	EO	XXX	4/1	NAIC	
	13	Management Discussion & Analysis	1	EO	XXX	4/1	Company	
	14	Schedule SIS	1	N/A	N/A	3/1	NAIC	
	15	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	
	16	Supplemental Schedule of Business Written By						
		Agency	1	N/A	XXX	4/1	NAIC	
			1					
		III. ELECTRONIC FILING REQUIREMENTS		•				
	61	Annual Statement Electronic Filing	XXX	ЕО	XXX	3/1	NAIC	
	62	March .PDF Filing	XXX	EO	XXX	3/1	NAIC	
	63	Supplemental Electronic Filing		EO		4/1	NAIC	
	64	Supplemental .PDF Filing	XXX	EO	XXX	4/1	NAIC	
			XXX	EO	XXX	5/15, 8/15,	NAIC	
	65	Quarterly Statement Electronic Filing	XXX	EO	xxx	11/15	NAIC	
	66	Quarterly .PDF Filing	xxx	ЕО	xxx	5/15, 8/15, 11/15	NAIC	
-	67	June .PDF Filing	XXX	EO	XXX	6/1	NAIC	
	07	Julie II DI Tilling	АЛА	LO	AAA	0/1	THE	
		IV. AUDIT/INTERNAL CONTROL			ı			
	0.1	RELATED REPORTS		FO	NT/A	C/1		1
	81	Accountants Letter of Qualifications	1	EO	N/A	6/1	Company	D
	82	Audited Financial Reports	1	EO	XXX	6/1	Company	R
	83	Audited Financial Reports Exemption Affidavit	1	N/A	N/A		Company	
	84	Communication of Internal Control Related				0.44	_	
		Matters Noted in Audit	11	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	
	88	Request for Exemption to File	1	N/A	N/A		Company	
	89	Relief from the five-year rotation requirement for						
		lead audit partner	1	EO	N/A	3/1	Company	
	90	Relief from the one-year cooling off period for						
		independent CPA	1	EO	N/A	3/1	Company	
	91	Relief from the Requirements for Audit						
		Committees	1	EO	N/A	3/1	Company	<u>                                     </u>
		V. STATE REQUIRED FILINGS***		•	•	•	•	•
	101	Corporate Governance Annual Disclosure***	1	0	XXX	6/1	Company	
	102	Filings Checklist (with Column 1 completed)	ЕО	0	EO	3/1	State	
	103	Signed Jurat	1	0	XXX	3/1	NAIC	L
	104	Form B-Holding Company Registration					1110	_
	107	Statement	1	0	xxx	4/30	State	
	105	Form F-Enterprise Risk Report ***	1	0	XXX	4/30	Company	
	105	ORSA ****	1	0	XXX	4/30	Company	
	107	State Filing Fees	EO	0	EO	3/1	State	
	10/	State 1 Hillg Pees	ĽU	U	EU	J/ 1	Siaic	I

(1)	(2)	(3)	(4) NUMBER OF COPIES*		(5)	(6) FORM	(7) APPLICABL	
Checklis	Line#	REQUIRED FILING FOR THE ABOVE STATE	Domestic		Foreig	DUE DATE	SOURCE*	E NOTES
ι		STATE	G	NATO	n		-	
			State	NAIC	State			
	108	Montana Premium Tax Report and Remittance	EO	0	EO	3/1	State	
	109	Quarterly Premium Tax Payments				4/15, 6/15,		
		•	EO	0	EO	9/15, 12/15	State	Q
	110	Annual Statement Montana State Page	EO	0	EO	3/1	Company	
	111	Certificate of Compliance	XXX	0	EO	3/1	Domicile	0
	112	Certificate of Deposit	XXX	0	EO	3/1	Domicile	P
	113	Group Capital Calculation (File with Lead State						
		Only)	1	0	XXX	4/30	Company	T

<sup>\*</sup>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).

<sup>\*\*</sup>If Form Source is NAIC, the form should be obtained from the appropriate vendor.

<sup>\*\*\*</sup>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: <a href="http://www.naic.org/public lead state report.htm">http://www.naic.org/public lead state report.htm</a>.

<sup>\*\*\*\*</sup>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: <a href="http://www.naic.org/public lead state report.htm">http://www.naic.org/public lead state report.htm</a>

<sup>\*\*\*\*\*</sup>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 <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: <a href="http://www.naic.org/public lead state report.htm">http://www.naic.org/public lead state report.htm</a>

	NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
A	Required Filings Contact Person:	
В	Mailing Address:	
С	Mailing Address for Filing Fees:	
D	Mailing Address for Premium Tax Payments:	
Е	Delivery Instructions:	
F	Late Filings:	
G	Original Signatures:	
Н	Signature/Notarization/Certification:	
I	Amended Filings:	
J	Exceptions from normal filings:	
K	Bar Codes (State or NAIC):	
т	C'	
M M	Signed Jurat:  NONE Filings:	
N	Filings new, discontinued or modified materially since last year:	
О	Certificate of Compliance	Foreign insurers must upload a copy of this certificate as part of the annual filing through OPTIns.
p	Certificate of Deposit	Foreign insurers must upload a copy of this certificate as part of the annual
Q	Quarterly Premium Tax Payments	filing through OPTIns.  Quarterly payments and forms must be submitted electronically through OPTIns. Every insurer is required to make quarterly payments by the 15 <sup>th</sup> of April, June, September and December, as follows: (1) An amount equal to 100% of its prior year premium tax; or (2) An amount equal to 90% of the current year tax

		obligation. Multiple payments may be made at one time. Payments may be made in advance. For example, it is acceptable to make all four quarterly payments on April 15. Any prior year overpayment will be applied as a first quarter payment and any excess as a second quarter payment and so on. Zero quarterly tax filings are not required.
R	Audited Financial Reports	Foreign insurers should refrain from submitting Audited Financial Statements to this office.
S	Actuarial Opinion	Domestic insurers are required to submit the actuarial opinion, including a copy of the actuarial report supporting the actuarial opinion together with related actuarial work papers.
Т	Group Capital Calculation (GCC):	Only a holding company system that: (1) Has Montana as the lead state and (2) Does not have a GCC exemption is required to file the calculation.

# 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 the annual statement, detail for investment schedules and all supplements due March 1.

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 (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 (generally, on its web site). 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.

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