

# FRATERNAL SOCIETIES

COMPANY NAME: \_\_\_\_\_ NAIC Company Code: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 REQUIRED FILINGS IN THE STATE OF: **LOUISIANA** Filings Made During the Year **2015**

(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			
		<b>I. NAIC FINANCIAL STATEMENTS</b>						
	1	Annual Statement (8 1/2"x14")	2	EO	xxx	3/1	NAIC	A-O
	1.1	Printed Investment Schedule detail (Pages E01-E27)	2	EO	xxx	3/1	NAIC	A-O
	2	Quarterly Financial Statement (8 1/2" x 14")	2	EO	xxx	5/15, 8/15, 11/15	NAIC	A-O
	3	Separate Accounts Annual Statement (8 1/2"x 14")	2	EO	xxx	3/1	NAIC	A-O
		<b>II. NAIC SUPPLEMENTS</b>						
	10	Accident & Health Policy Experience Exhibit	2	EO	xxx	4/1	NAIC	A-O
	11	Analysis of Annuity Operations by Lines of Business	2	EO	xxx	4/1	NAIC	A-O
	12	Analysis of Increase in Annuity Reserves During Year	2	EO	xxx	4/1	NAIC	A-O
	13	Health Care Exhibit (Parts 1, 2 and 3) Supplement	2	EO	xxx	4/1	NAIC	A-O
	14	Health Care Exhibit's Allocation Report Supplement	2	EO	xxx	4/1	NAIC	A-O
	15	Interest Sensitive Life Insurance Products Report	2	EO	xxx	4/1	NAIC	A-O
	16	Investment Risk Interrogatories	2	EO	xxx	4/1	NAIC	A-O
	17	Long-Term Care Experience Reporting Forms	2	EO	xxx	4/1	NAIC	A-O
	18	Management Discussion & Analysis	2	EO	xxx	4/1	Company	A-O
	19	Medicare Supplement Insurance Experience Exhibit	2	EO	xxx	3/1	NAIC	A-O
	20	Medicare Part D Coverage Supplement	2	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A-O
	21	Risk-Based Capital Report	2	EO	xxx	3/1	NAIC	A-O
	22	Supplemental Compensation Exhibit	2	N/A	N/A	3/1	NAIC	A-O
	23	Trusted Surplus Statement	2	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A-O
	24	XXX/AXXX Reinsurance Exhibit	2	EO	xxx	4/1	NAIC	A-O
		<b>Actuarial Related Items</b>						
	25	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	2	EO	xxx	3/1	Company	A-O
	26	Actuarial Certification Related to Hedging required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	A-O
	27	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	A-O
	28	Actuarial Certification regarding use 2001 Preferred Class Table	2	EO	xxx	3/1	Company	A-O
	29	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	2	N/A	xxx	4/30	Company	A-O
	30	Actuarial Opinion	2	EO	xxx	3/1	Company	A-O
	31	Actuarial Opinion on X-Factors	2	EO	xxx	3/1	Company	A-O
	32	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	2	EO	xxx	3/1	Company	A-O
	33	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	2	EO	xxx	3/1	Company	A-O
	34	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	2	EO	xxx	3/1	Company	A-O
	35	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	A-O
	36	Management Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	A-O
	37	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-O
	38	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-O
	39	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-O
	40	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-O
	41	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-O
	42	RBC Certification required under C-3 Phase I	2	EO	xxx	3/1	Company	A-O

	43	RBC Certification required under C-3 Phase II	2	EO	xxx	3/1	Company	A-O
	44	Statement on non-guaranteed elements – Exhibit 5 Int. #3	2	EO	xxx	3/1	Company	A-O
	45	Statement on participating/non-participating policies – Exhibit 5, Inter. #1&2	2	EO	xxx	3/1	Company	A-O
	46	RAAIS required by Actuarial Opinion and Memorandum Regulation (Model 822), Section 7A(5)	2	N/A	xxx	3/15	Company	A-O
		<b>III. ELECTRONIC FILING REQUIREMENTS</b>						
	60	Annual Statement Electronic Filing	xxx	EO	xxx	3/1	NAIC	
	61	March .PDF Filing	xxx	EO	xxx	3/1	NAIC	
	62	Risk-Based Capital Electronic Filing	xxx	EO	N/A	3/1	NAIC	
	63	Risk-Based Capital .PDF Filing	xxx	EO	N/A	3/1	NAIC	
	64	Separate Accounts Electronic Filing	xxx	EO	xxx	3/1	NAIC	
	65	Separate Accounts .PDF Filing	xxx	EO	xxx	3/1	NAIC	
	66	Supplemental Electronic Filing	xxx	EO	xxx	4/1	NAIC	
	67	Supplemental .PDF Filing	xxx	EO	xxx	4/1	NAIC	
	68	Quarterly Statement Electronic Filing	xxx	EO	xxx	5/15, 8/15 & 11/15	NAIC	
	69	Quarterly .PDF Filing	xxx	EO	xxx	5/15, 8/15 & 11/15	NAIC	
	70	June .PDF Filing	xxx	EO	xxx	6/1	NAIC	
		<b>IV. AUDIT/INTERNAL CONTROL RELATED REPORTS</b>						
	81	Accountants Letter of Qualifications	2	EO	N/A	6/1	Company	A-P
	82	Audited Financial Reports	2	EO	xxx	6/1	Company	A-P
	83	Audited Financial Reports Exemption Affidavit	0	N/A	1	5/20	Company	A-P
	84	Communication of Internal Control Related Matters Noted in Audit	2	N/A	N/A	8/1	Company	A-P
	85	Independent CPA (change)	2	N/A	N/A	Within 5 days of Change	Company	A-P
	86	Management's Report of Internal Control Over Financial Reporting	2	N/A	N/A	8/1	Company	A-P
	87	Notification of Adverse Financial Condition	2	N/A	N/A	6/1	Company	A-P
	88	Request for Exemption to File	1	N/A	N/A	5/20	Company	A-P
	89	Relief from the five-year rotation requirement for lead audit partner	1	EO	N/A	3/1	Company	A-P
	90	Relief from the one-year cooling off period for independent CPA	1	EO	N/A	3/1	Company	A-P
	91	Relief from the Requirements for Audit Committees	1	EO	N/A	3/1	Company	A-P
		<b>V. STATE REQUIRED FILINGS***</b>						
	101	Certificate of Compliance	0	0	1	3/1	State	A-O
	102	Certificate of Deposit	0	0	1	3/1	State	A-O
	103	Certificate of Valuation	0	0	1	3/1	State	A-O
	104	Filings Checklist (with Column 1 completed)	1	0	0	3/1, 5/15, 8/15, 11/15	State	A-O
	105	Premium tax	0	0	0	Not Applicable	State	A-O
	106	State Filing Fees (\$25)	1	0	1	3/1	State	A-O
	107	Signed Jurat	xxx	0	xxx	Not Applicable	NAIC	A-O
	108	Detailed Listing of Investments w/Code Citations	1	0	0	3/1	Company	A-O

\*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.

\*\*\*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 not 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](http://www.naic.org/public_lead_state_report.htm)

		<b>NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)</b>	
	A	Required Filings Contact Person:	Stewart Guerin (225) 219-3929 <a href="mailto:sguerin@ldi.la.gov">sguerin@ldi.la.gov</a>
	B	Mailing Address:	<div> <div> <b>MAILING</b>  Louisiana Department of Insurance  Administrative Services  P. O. Box 94214  Baton Rouge, LA 70804-9214 </div> <div> <b>PHYSICAL</b>  Louisiana Department of Insurance  Administrative Services  1702 North 3rd Street  Baton Rouge, LA 70802 </div> </div>
	C	Mailing Address for Filing Fees (\$25):	<div> <div> <b>MAILING</b>  Louisiana Department of Insurance  Insurance Premium Tax Division  P. O. Box 94214  Baton Rouge, LA 70804-9214 </div> <div> <b>PHYSICAL</b>  Louisiana Department of Insurance  Insurance Premium Tax Division  1702 North 3rd Street  Baton Rouge, LA 70802 </div> </div>
	D	Mailing Address for Premium Tax Payments:	Not Applicable
	E	Delivery Instructions:	All filings must be <u>postmarked</u> no later than the indicated due date. If the due date falls on a weekend or holiday, the deadline is extended to the next business day.
	F	Late Filings:	All filings not delivered in accordance with Note E above will be considered late, and may be subject to regulatory action including fines and/or suspension.
	G	Original Signatures:	Original notarized signatures required on all filings from <b>Domestic</b> companies. <b>Foreign</b> companies should follow the NAIC Annual Statement Instructions.
	H	Signature/Notarization/Certification:	Signatures of at least two principal officers are required for Annual and Quarterly Statement filings.
	I	Amended Filings:	Amended items must be filed within 10 days of their amendment, along with an explanation of the amendments. If there are signature requirements for the original filing, same should be followed for any amendment.
	J	Exceptions from normal filings:	<b>Foreign</b> companies shall supply a written copy of any exemption or extension received by its state of domicile at least 10 days prior to the filing due date to receive such from Louisiana. <b>Domestic</b> companies shall apply at least 10 days prior to the original due date.
	K	Bar Codes (State or NAIC):	Not Applicable
	L	Signed Jurat:	Not Applicable
	M	NONE Filings:	“NONE” Filings are not required.
	N	Filings new, discontinued or modified materially since last year:	None
	O	Physical Street Address:	1702 North Third Street Baton Rouge, LA 70802
	P	Audited Financial Statements	No longer required to file hard copy if a hard copy is filed with the state of domicile, and electronically with the NAIC.

**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 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 ***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 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.