UNITED STATES BRANCH OF NON-US INSURERS That DO NOT use MICHIGAN as a Port of Entry

COMPANY NAME:	_NAIC Company Code:
Contact:	Telephone:
REQUIRED FILINGS IN THE STATE OF: MICHIGAN	Filings Made During the Year 2025

(1)	(2)	(3)	(4)			(5)	(6)	(7)
Check Line		. ,	NUMBER OF COPIES*			` ^	FORM	A DDI ICA DI E
		REQUIRED FILINGS FOR THE ABOVE STATE	Domestic		Foreign	DUE DATE	SOURCE **	APPLICABLE NOTES
			State	NAIC	State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 ½"x14")	N/A	N/A	XXX	3/1	NAIC	A-J, L
	1.1	Printed Investment Schedule detail (Pages E01-E29)	N/A	N/A	XXX	3/1	NAIC	A-J, L
	2	Quarterly Financial Statement (8 ½" x 14")	N/A	N/A	XXX	5/15, 8/15,	NAIC	A-J, L
						11/15		
	3	Separate Accounts Annual Statement (8 ½"x14")	N/A	N/A	XXX	3/1	NAIC	A-J, L
		II. NAIC SUPPLEMENTS						
	11	Accident & Health Policy Experience Exhibit	N/A	N/A	XXX	4/1	NAIC	A-J, L
	12	Credit Insurance Experience Exhibit	N/A	N/A	XXX	4/1	NAIC	A-J, L
	13	Health Supplement	N/A	N/A	XXX	3/1	NAIC	A-J, L
	14	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit, Parts 1 and 2	N/A	N/A	XXX	4/1	NAIC	A-J, L
	15	Long Term Care Experience Reporting Forms	N/A	N/A	XXX	4/1	NAIC	A-J, L
	16	Management Discussion & Analysis	N/A	N/A	XXX	4/1	Company	A-J
	17	Market Conduct Annual Statement Premium Exhibit for Year	N/A	N/A	XXX	3/1	NAIC	A-J, L
	18	Medicare Supplement Insurance Experience Exhibit	N/A	N/A	XXX	3/1	NAIC	A-J, L
	19	Medicare Part D Coverage Supplement	N/A	N/A	XXX	3/1, 5/15, 8/15,	NAIC	A-J, L
						11/15		<u> </u>
	20	Risk-Based Capital Report	N/A	N/A	N/A	3/1	NAIC	A-J
	21	Schedule SIS	N/A	N/A	N/A	3/1	NAIC	A-J, L
	22	Supplemental Compensation Exhibit	N/A	N/A	N/A	3/1	NAIC	A-J, L
	23	Supplemental Health Care Exhibit (Part 1 and 2)	N/A	N/A	XXX	4/1	NAIC	A-J, L
	24	Supplemental Investment Risk Interrogatories	N/A	N/A	XXX	4/1	NAIC	A-J, L
	25	Supplemental Schedule O	N/A	N/A	XXX	3/1	NAIC	A-J, L
	26	Supplemental Term and Universal Life Insurance Reinsurance Exhibit	N/A	N/A	xxx	4/1	NAIC	A-J, L
	27	Trusteed Surplus Statement	N/A	N/A	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A-J, L
	28	Variable Annuities Supplement	N/A	EO	XXX	4/1	NAIC	A-J, L
	29	VM 20 Reserves Supplement	N/A	EO	XXX	3/1	NAIC	A-J, L
	30	Workers' Compensation Carve Out Supplement	N/A	N/A	XXX	3/1	NAIC	A-J, L
		Actuarial Related Items						
	31	Actuarial Certification regarding use 2001 Preferred Class Table	N/A	N/A	XXX	3/1	Company	A-J, L
	32	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	N/A	N/A	xxx	3/1	Company	A-J, L
	33	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial	N/A	N/A	N/A	4/30	Company	A-J, L
	2.1	Guideline XXXVIII 8D	77/:	3.77	-	2/1		A T T
	34	Actuarial Opinion	N/A	N/A	XXX	3/1	Company	A-J, L
	35	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	N/A	N/A	XXX	3/1	Company	A-J, L
	36	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	N/A	N/A	xxx	3/1	Company	A-J, L
	37	Actuarial Opinion on X-Factors	N/A	N/A	XXX	3/1	Company	A-J, L
	38	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	N/A	N/A	xxx	3/1	Company	A-J, L
	39	Request for Life PBR Exemption (if applicable)	ЕО	ЕО	xxx	Commissioner 7/1 NAIC 8/15	Company	A-J, L
	40	Executive Summary of the PBR Actuarial Report	N/A	N/A	N/A	4/1	Company	A-J, L
	41	Life Summary of the PBR Actuarial Report	N/A	N/A	N/A	4/1	Company	A-J, L
	42	Variable Annuities Summary of the PBR Actuarial Report	N/A	N/A	N/A	4/1	Company	A-J, L
	43	PBR Actuarial Report (provide upon request)	N/A	N/A	N/A	1/ 1	Company	A-J, L
	44	Regulatory Asset Adequacy Issues Summary (send to	N/A	N/A	XXX	4/1	Company	A-J
		Office of Insurance Evaluation of the Department of Insurance and Financial Services)	I WA	IVA	7.7.7		Company	
	45	Reasonableness & Consistency of Assumptions	XXX	N/A	XXX	3/1, 5/15, 8/15,	Company	A-J, L
				11/11	ΛΛΛ	, J, 1, J, 1J, 0/1J,	Company	. , –

46	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	XXX	N/A	XXX	3/1, 5/15, 8/15, 11/15	Company	A-J, L
47	Reasonableness & Consistency of Assumptions Cert. required by Actuarial Guideline XXXVI (Updated Average Market Value)	xxx	N/A	XXX	3/1, 5/15, 8/15, 11/15	Company	A-J, L
48	Reasonableness & Consistency of Assumptions Cert. required by Actuarial Guideline XXXVI (Updated Market Value)	XXX	N/A	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
49	Reasonableness of Assumptions Cert. for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	XXX	N/A	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
50	RBC Certification required under C-3 Phase I	N/A	N/A	N/A	3/1	Company	A-J
51	RBC Certification required under C-3 Phase II	N/A	N/A	N/A	3/1	Company	A-J
52	Statement on non-guaranteed elements - Exhibit 5 Interrogatory #3	N/A	N/A	XXX	3/1	Company	A-J, L
53	Statement on participating/non-participating policies - Exhibit 5 Interrogatory #1 & 2	XXX	N/A	XXX	3/1	Company	A-J, L
	III. ELECTRONIC FILING REQUIREMENTS						
60	Annual Statement Electronic Filing	N/A	N/A	XXX	3/1	NAIC	A-J, L
61	March .PDF Filing	N/A	N/A	XXX	3/1	NAIC	A-J, L
62	Separate Accounts Electronic Filing	N/A	N/A	XXX	3/1	NAIC	A-J, L
63	Separate Accounts .PDF Filing	N/A	N/A	XXX	3/1	NAIC	A-J, L
64	Supplemental Electronic Filing	N/A	N/A	XXX	4/1	NAIC	A-J, L
65	Supplemental .PDF Filing	N/A	N/A	XXX	4/1	NAIC	A-J, L
66	Quarterly Electronic Filing	N/A	N/A	XXX	5/15, 8/15, 11/15	NAIC	A-J, L
67	Quarterly .PDF Filing	N/A	N/A	XXX	5/15, 8/15, 11/15	NAIC	A-J, L
68	June .PDF Filing	N/A	N/A	XXX	6/1	NAIC	A-J, L
	IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
81	Accountants Letter of Qualifications	N/A	N/A	N/A	6/1	Company	A-J, N
82	Audited Financial Reports	N/A	N/A	XXX	6/1	Company	A-J, N
83	Audited Financial Statements Exemption Affidavit	N/A	N/A	N/A	6/1	Company	A-J
84	Communication of Internal Control Related Matters Noted in Audit	N/A	N/A	XXX	8/1	Company	A-J, P
85	Independent CPA (change)	N/A	N/A	N/A	6/1	Company	A-J, N
86	Management's Report of Internal Control Over Financial Reporting	N/A	N/A	N/A	8/1	Company	A-J
87	Notification of Adverse Financial Condition	N/A	N/A	EO	SEE NOTE	Company	A-J, O
88	Request for Exemption to File	N/A	N/A	N/A	SEE NOTE	Company	A-J, Q A-J
90	Relief from the five-year rotation requirement for lead audit partner Relief from the one-year cooling off period for independent	N/A N/A	N/A N/A	N/A N/A	3/1	Company Company	A-J
	CPA						A-J
91	Relief from the Requirements for Audit Committees	N/A	N/A	N/A	3/1	Company	A-J
	V. STATE REQUIRED FILINGS				ODD 444 DDY 0		<u> </u>
101	Corporate Governance Annual Disclosure ***	N/A	0	N/A	SEE *** BELOW	Company	A-J
102	Filings Checklist (with Column 1 completed)	N/A	N/A	3.T/A	5/1	State	A-J
103 104	Form B-Holding Company Registration Statement Form F-Enterprise Risk Report (per Section 1325a of the	N/A N/A	N/A N/A	N/A N/A	5/1 5/1	Company Company	A-J, R A-J, R
105	Michigan Insurance Code) **** ORSA (This filing is intended to be submitted to the lead state if filed at the insurance group level. See Chapter 17 of the Michigan Insurance Code.) *****	N/A	0	N/A	SEE **** BELOW	Company	A-J
106	Premium Tax	N/A	N/A		SEE NOTE	State	С
107	Signed Ivent	NT/A	NT/A	0	CEE NOTE	NAIC	K
107 108	Signed Jurat Group Capital Calculation (File with lead state only)	N/A N/A	N/A N/A	N/A	SEE NOTE 5/1		A-J, R
108	Group Capital Calculation (File with lead state only) Accident and Sickness Insurance Advertising Certificate of Compliance per Admin Rule 500.668 – only applies to insurers writing disability insurance. Advertisement of Life Insurance and Annuities Certificate of Compliance per Admin Rule 500.1385. Submit via SERFF.	N/A N/A	N/A N/A	EO	3/1	Company	A-J, K
110	Annual State of total business on the form filed with the domiciliary regulator of the country of origin (include a copy in English)	N/A	N/A	ЕО	When available	Company	A-J

111	Complaint and Grievance Summary for Health Carriers (File Via SERFF)	N/A	N/A	ЕО	4/15	State- FIS 0318	A-J
112	Michigan Health Insurance Enrollment, Premiums and Losses (Companies should note that beginning with the 2015 reporting year, the FIS 0322 must be submitted electronically to DIFS. The submission website address, along with an authentication code and more detailed instructions, will be sent to the Statutory Statement Contact on or before March 1)	N/A	N/A	ЕО	4/1	State- FIS 0322	A-J

*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).

- ***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: http://www.naic.org/public_lead_state_report.htm. Michigan has adopted the NAIC Corporate Governance Annual Disclosure Model Act through Public Act 520 of 2018 effective January 1, 2020.
- ****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: http://www.naic.org/public lead state report.htm
- *****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: http://www.naic.org/public_lead_state_report.htm. ORSA filings are required in Michigan starting in 2018.

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