

# TITLE COMPANIES

COMPANY NAME: \_\_\_\_\_ NAIC Company Code: \_\_\_\_\_

Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

REQUIRED FILINGS IN THE STATE OF: NEW YORK Filings Made During the Year 2021

| (1)<br>Check-<br>List | (2)<br>Line # | (3)<br>REQUIRED FILING FOR THE ABOVE STATE                                    | (4)<br>NUMBER OF COPIES* |      |         | (5)<br>DUE<br>DATE      | (6)<br>FORM<br>SOURCE** | (7)<br>APPLICABLE<br>NOTES |
|-----------------------|---------------|---|--------------------------|------|---------|-------------------------|-------------------------|----------------------------|
|                       |               |   | Domestic                 |      | Foreign |                         |                         |                            |
|                       |               |   | State                    | NAIC | State   |                         |                         |                            |
|                       |               | <b>I. NAIC FINANCIAL STATEMENTS</b>   |                          |      |         |                         |                         |                            |
|                       | 1             | Annual Statement (8 ½" x 14")   | 1                        | EO   | xxx     | 3/1                     | NAIC                    |                            |
|                       | 1.1           | Printed Investment Schedule detail (Pages E01-E29)                            | 1                        | EO   | xxx     | 3/1                     | NAIC                    |                            |
|                       | 2             | Quarterly Financial Statement (8 ½" x 14")                                    | 1                        | EO   | xxx     | 5/15,<br>8/15,<br>11/15 | NAIC                    |                            |
|                       |               |   |                          |      |         |                         |                         |                            |
|                       |               | <b>II. NAIC SUPPLEMENTS</b>   |                          |      |         |                         |                         |                            |
|                       | 11            | Actuarial Opinion   | 1                        | EO   | xxx     | 3/1                     | Company                 |                            |
|                       | 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                        | EO   | xxx     | 4/1                     | NAIC                    |                            |
|                       |               |   |                          |      |         |                         |                         |                            |
|                       |               | <b>III. ELECTRONIC FILING REQUIREMENTS</b>                                    |                          |      |         |                         |                         |                            |
|                       | 61            | Annual Statement Electronic Filing  | xxx                      | 1    | xxx     | 3/1                     | NAIC                    |                            |
|                       | 62            | March .PDF Filing   | xxx                      | 1    | xxx     | 3/1                     | NAIC                    |                            |
|                       | 63            | Supplemental Electronic Filing  | xxx                      | 1    | xxx     | 4/1                     | NAIC                    |                            |
|                       | 64            | Supplemental .PDF Filing  | xxx                      | 1    | xxx     | 4/1                     | NAIC                    |                            |
|                       | 65            | Quarterly Statement Electronic Filing   | xxx                      | 1    | xxx     | 5/15,<br>8/15,<br>11/15 | NAIC                    |                            |
|                       | 66            | Quarterly .PDF Filing   | xxx                      | 1    | xxx     | 5/15,<br>8/15,<br>11/15 | NAIC                    |                            |
|                       | 67            | June .PDF Filing  | xxx                      | 1    | xxx     | 5/31                    | NAIC                    |                            |
|                       |               |   |                          |      |         |                         |                         |                            |
|                       |               | <b>IV. AUDIT/INTERNAL CONTROL RELATED REPORTS</b>                             |                          |      |         |                         |                         |                            |
|                       | 81            | Accountants Letter of Qualifications  | 1                        | EO   | N/A     | 5/31                    | Company                 |                            |
|                       | 82            | Audited Financial Reports   | 1                        | EO   | xxx     | 5/31                    | Company                 |                            |
|                       | 83            | Audited Financial Reports Exemption Affidavit                                 | 1                        | N/A  | N/A     | 5/31                    | Company                 |                            |
|                       | 84            | Communication of Internal Control Related Matters Noted in Audit              | 1                        | EO   | N/A     | 5/31                    | Company                 | See NOTE O                 |
|                       | 85            | Independent CPA (change)  | 1                        | N/A  | N/A     | See Note P              | Company                 | See NOTE P                 |
|                       | 86            | Management's Report of Internal Control Over Financial Reporting              | 1                        | N/A  | N/A     | 5/31                    | Company                 |                            |
|                       | 87            | Notification of Adverse Financial Condition                                   | 1                        | N/A  | 1       | See Note Q              | Company                 | See NOTE Q                 |
|                       | 88            | Request for Exemption to File   | 1                        | N/A  | N/A     | Prior to 12/31          | Company                 |                            |
|                       | 89            | Relief from the five-year rotation requirement for Lead audit partner         | 1                        | EO   | N/A     | Prior to 12/31          | Company                 |                            |
|                       | 90            | Relief from the one-year cooling off period for Independent CPA               | 1                        | EO   | N/A     | Prior to 12/31          | Company                 |                            |
|                       | 91            | Relief from the Requirements for Audit Committees                             | 1                        | EO   | N/A     | Prior to 12/31          | Company                 |                            |
|                       | 92            | Report of Significant Deficiencies in Internal Controls                       | 1                        | N/A  | 1       | 5/31                    | Company                 |                            |
|                       |               |   |                          |      |         |                         |                         |                            |
|                       |               | <b>V. STATE REQUIRED FILINGS</b>  |                          |      |         |                         |                         |                            |
|                       | 101           | Filings Checklist (with Column 1 completed)                                   | 1                        | 0    | 0       | 3/1                     | State                   |                            |
|                       | 102           | Corporation Franchise Tax to Dept. of Taxation (copy to Insurance Department) | 1                        | 0    | 1       | 3/15                    | State                   | NOTE N                     |
|                       | 103           | Annual Call   | 1                        | 0    | 1       | 3/1                     | State                   |                            |

|  |        |   |   |   |   |                         |              |            |
|--|--------|---|---|---|---|-------------------------|--------------|------------|
|  | 104    | Signed Notarized Jurat (NAIC Blank)           | 1 | 0 | 0 | 3/1                     | NAIC / State |            |
|  | 104(a) | Signed Notarized Jurat (Quarterly)            | 1 | 0 | 0 | 5/15,<br>8/15,<br>11/15 |              |            |
|  | 105    | Form B-Holding Company Registration Statement | 1 | 0 | 1 | 5/1                     | Company      | See Note R |
|  | 106    | Corporate Governance Annual Disclosure***     | 1 | 0 | 1 | 6/1                     | Company      | See Note R |
|  | 107    | Form F-Enterprise Risk Report ****            | 1 | 0 | 1 | 4/30                    | Company      | See Note S |
|  | 108    | ORSA*****                                     | 1 | 0 | 0 | 12/1                    | Company      | See Note S |

\*If XXX appears in this column, this state does not require this filing, if hard and / or electronic 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.

\*\*\*The Corporate Governance Annual Disclosure is required to be filed annually by authorized insurers. The Corporate Governance Annual Disclosure is a state filing only and should not be submitted by the company to the NAIC. For more information, please refer to [Regulation 215](#) (11 NYCRR 90).

\*\*\*\*A Form F filing is required to be filed annually by a New York domestic insurer that is not part of a group and meets a specified premium threshold. For groups, it must be filed by the ultimate holding company for an Article 15 group and by the parent domestic insurer in an Article 16 group. 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. For more information, please refer to [Regulation 203](#) (11 NYCRR 82) on the NYCRR.

\*\*\*\*\*An ORSA Summary Report is required to be filed annually by a New York domestic insurer that meets a specified premium threshold and/or where the New York domestic insurer is a member of a group that meets a specified premium threshold. The ORSA Summary Report is a state filing only and should not be submitted by the company to the NAIC. For more information, please refer to [Regulation 203](#) (11 NYCRR 82) on the NYCRR.

|  |   | NOTES AND INSTRUCTIONS           | (A-R APPLY TO ALL FILINGS)  |
|--|---|----------------------------------|---|
|  | A | Required Filings Contact Person: | <p>Mr. Gilbert Denton, Senior Insurance Examiner<br/> New York State Department of Financial Services<br/> Property Bureau – 4<sup>th</sup> Floor<br/> One State Street<br/> New York, NY 10004<br/> (212) 480-4669<br/> E-mail: <a href="mailto:Gilbert.Denton@dfs.ny.gov">Gilbert.Denton@dfs.ny.gov</a><br/> When answering by e-mail, please include telephone number</p>  |
|  | B | Mailing Address:                 | <p>Annual Statement and related items (hard copies); Audited Financial Statement; Quarterly Statement (hard copies); Certificate of Compliance; and Certificate of Deposit:</p> <p>Mr. Gilbert Denton, Senior Insurance Examiner<br/> New York State Department of Financial Services<br/> Property Bureau – 4<sup>th</sup> Floor<br/> One State Street<br/> New York, NY 10004</p> <p><u>CD</u> (See Note M):</p> <p>Mr. Gilbert Denton, Senior Insurance Examiner<br/> New York State Department of Financial Services<br/> Property Bureau – 4<sup>th</sup> Floor<br/> One State Street<br/> New York, NY 10004</p>                            |
|  | C | Mailing Address for Filing Fees: | N/A   |
|  | D | Delivery Instructions:           | <p>All Department of Financial Services filings must be physically received at the appropriate address as indicated in NOTE B no later than the indicated due date. Companies should file <b>ONLY ONE COMPANY</b> per package. <b>If the due date falls on a weekend, or a legal holiday, then the filing must be received by the Department by the end of the next business day.</b></p> <p>The Supplement must be bound at the left side in sequential order and it must have a "COVER" page that indicates New York Supplement to the Annual Statement, the FULL Company Name and the Year. Diskettes should be labeled.</p>                   |
|  | E | Late Filings:                    | <p>Failure to timely file any component of an annual, quarterly or NY supplement filing subjects insurer to penalties set forth in NY Insurance Law Section 307 and 308.</p> <p><b>New York statute does not provide for any extensions in the filing deadlines for Annual Statements. Further, extensions for the filing of audited financial statements are only provided upon written application by the insurer to the superintendent, and such extension is only granted if the superintendent finds that compliance would constitute a financial or organizational hardship, as provided in Section 307(b)(3) of the Insurance Law.</b></p> |
|  | F | Original Signatures:             | Actual live signatures required.  |

|  |   |   |   |
|--|---|---|---|
|  | G | Signature/Notarization/Certification:                             | Appropriate notarization required on the actual document.   |
|  | H | Amended Filings:  | <p>Only accepted in accordance with the Department's prior instructions.</p> <p>All amendments to your Annual Statement and/or New York Supplement must be provided in hard copy <b>as well as an amended ELECTRONIC filing. Foreign insurers can file electronically.</b></p> <p>Note: For Amended New York Supplement filings, the entire electronic filing is required.</p>  |
|  | I | Exceptions from normal filings:                                   | Only accepted in accordance with the Department's prior instructions  |
|  | J | Bar Codes (State or NAIC):  | The NAIC Annual Statement and New York Supplement require the use of bar codes on the jurat page and certain other pages and forms. In addition, the Department requires the Audited Financial Statements and the documents submitted pursuant to Regulation 118 to be bar coded. General Bar Coding instructions and a full listing of New York required bar coded forms are included on the web site.   |
|  |   |   |   |
|  | K | NONE Filings:   | All parts of the Annual Statement except those schedules identified as N/A on the checklist and all parts of the New York Supplement must be accounted for. If there is nothing to report, you may complete the NAIC Annual Statement page entitled "Supplemental Exhibits and Schedules Interrogatories" INSTEAD OF filing reports marked "None". Also, you must complete the New York Supplement page entitled "Supplemental Exhibits and Schedules Interrogatories" if there is nothing to report for those New York Supplement, exhibits or schedules. You need not file reports marked "None".         |
|  | L | Filings new, discontinued or modified materially since last year: | None  |
|  | M | Internet Filing:  | <p>Instructions concerning internet filing alternative to filing a cd with New York are set forth in Circular Letter No. 4 (2001) and Supplement 1 to Circular Letter No. 4 (2001), dated 2/6/08.</p> <p>All companies are strongly encouraged to file national form filings (as identified in items 61, 62, 63, 64, 65, 66 and 67 in the checklist) with the NAIC via the Internet. By filing over the Internet with the NAIC, an insurer will have fulfilled its <b>electronic</b> filing requirement for national forms with New York and therefore should <b>not</b> file a cd with the Department.</p> |
|  | N | Corporation Franchise Tax to Dept. of Taxation                    | <p>Mail the CT-33NL return and payment to:</p> <p>NYS Corporation Tax<br/>PO Box 15181<br/>Albany NY 12212-5181</p> <p>Also mail a copy to:</p> <p>NYS Department of Financial Services</p>   |

|  |   |  |   |
|--|---|--|---|
|  |   |  | Office of Financial Management<br>One Commerce Plaza<br>Albany, NY 12257  |
|  | O | Communication of Internal Control Related Matters Noted in Audit                         | File electronically with the NAIC.  |
|  | P | Independent CPA (change)   | Provide updated information (name, address, telephone number and e-mail address) within 60 days of any change in CPA. See Regulation 118, Section 89.4(c) for additional reporting requirements if the CPA is dismissed or resigns.   |
|  | Q | Notification of Adverse Financial Condition  | Required to be furnished, in writing, to the Superintendent, within five business days of any determination by the CPA that the Company has materially misstated its financial condition as reported to the superintendent as of the balance sheet currently under audit or that the Company does not meet the minimum capital or surplus requirement of the insurance law as of that date. |
|  | R | Form B-Holding Company Registration Statement and Corporate Governance Annual Disclosure | Submit electronically through the Department's <a href="#">Insurance Company and Fraternal Benefit Society Filings Portal</a> .   |
|  | S | Form F-Enterprise Risk Report and ORSA   | Submit electronically through the <a href="#">Department's Insurance Company and Fraternal Benefit Society Filings Portal</a> .   |

**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 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 (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

(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 before submitting a filing.