## PROPERTY & CASUALTY INSURERS

COMPANY NAME:		NAIC Company Code:		
Contact:	Telep	phone:		
REQUIRED FILINGS IN THE STATE OF:	GUAM	Filings Made During the Year 2024		

(1)	(2)	(3)	(4)		(5)	(6)	(7) APPLICABLE	
GI 11:	<b>.</b> ,	DECLUDED BY DICK FOR THE A DOLLE STATE			NUMBER OF COPIES*			FORM
Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	Dome		Foreign	DUE DATE	SOURCE**	NOTES
		I. NAIC FINANCIAL STATEMENTS	State	NAIC	State		<u> </u>	
	1	Annual Statement (8 ½" x 14")		EO	1	3/1; 4/1 for	NAIC	Note O
	1	Annual Statement (8 ½ X 14 )	1	EO	1	State filing	NAIC	Note O
	1.1	Printed Investment Schedule detail (Pages E01-E29)	1	EO	XXX	3/1	NAIC	
	2	Quarterly Financial Statement (8 ½" x 14")		EO	ΑΛΛ	5/15, 8/15,	NAIC	
	2	Quarterry 1 manetar Statement (6 /2 X 14 )	1	LO	N/A	11/15	NAIC	
	3	Protected Cell Annual Statement	-	0	XXX	3/1	NAIC	
	4	Combined Annual Statement (8 ½" x 14")		EO		5/1	NAIC	
		( : : : : )					- 1,120	
		II. NAIC SUPPLEMENTS						
	11	Accident & Health Policy Experience Exhibit	1	EO	1	4/1	NAIC	
	12	Actuarial Opinion		EO		3/1; 4/1 for	Company	
			1		1	State filing		
	13	Actuarial Opinion Summary		N/A		3/15	Company	
	14	Bail Bond Supplement		EO		3/1	NAIC	
	15	Combined Insurance Expense Exhibit		EO		5/1	NAIC	
	16	Credit Insurance Experience Exhibit		EO	XXX	4/1	NAIC	
	17	Cybersecurity and Identity Theft Insurance		EO		4/1	NAIC	
		Coverage Supplement						
	18	Director and Officer Insurance Coverage		EO		3/1, 5/15,	NAIC	
	10	Supplement		EO		8/15, 11/15	NATO	
	19	Exhibit of Other Liabilities By Lines of Business as Reported on Line 17 of the Exhibit of Premiums and		EO		3/1	NAIC	
		Losses						
	20	Financial Guaranty Insurance Exhibit		EO		3/1	NAIC	
	21	Insurance Expense Exhibit	1	EO	1	4/1	NAIC	Note O
	22	Life, Health & Annuity Guaranty Association	-	LO		1/ 1	TWHE	11010 0
		Assessable Premium Exhibit, Parts 1 and 2		EO	XXX	4/1	NAIC	
	23	Long-Term Care Experience Reporting Forms		EO	XXX	4/1	NAIC	
	24	Management Discussion & Analysis	1	EO	1	4/1	Company	
	25	Market Conduct Annual Statement Premium Exhibit					1 2	
		for Year						
	<mark>26</mark>	Medicare Part D Coverage Supplement		EO		3/1, 5/15,	NAIC	
						8/15, 11/15		
	<mark>27</mark>	Medicare Supplement Insurance Experience Exhibit		EO	XXX	3/1	NAIC	
	<mark>28</mark>	Mortgage Guaranty Insurance Exhibit		EO	XXX	4/1	NAIC	
	29	Premiums Attributed to Protected Cells Exhibit		EO		3/1	NAIC	
	30	Private Flood Insurance Supplement		EO		4/1	NAIC	
	31	Reinsurance Attestation Supplement		EO	XXX	3/1	Company	
	32	Exceptions to Reinsurance Attestation Supplement		N/A	XXX	3/1	Company	
	33	Reinsurance Summary Supplemental		EO	XXX	3/1	NAIC	
	<mark>34</mark>	Risk-Based Capital Report	1	EO	XXX	3/1; 4/1 for	NAIC	
	35	Schedule SIS	1	N/A	N/A	State filing 3/1	NAIC	
	36	Supplement A to Schedule T		EO	IN/A	3/1, 5/15,	NAIC	
	30	Supplement A to schedule 1		EU		8/15, 11/15	NAIC	
	<del>37</del>	Supplemental Compensation Exhibit		N/A	N/A	3/1	NAIC	
	38	Supplemental Health Care Exhibit (Parts 1 and 2)	1	EO	1	4/1	NAIC	Note O
	39	Supplemental Investment Risk Interrogatories		EO		4/1	NAIC	
		Tr				1		•

(1)	(2)	(3)		(4)		(5)	(6)	(7)
(1)	(2)	(3)	NUMBER OF COPIES*		(3)	FORM	(7) APPLICABLE	
Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	Domestic Foreign		DUE DATE	SOURCE**	NOTES	
			State	NAIC	State	1		
	40	Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts		EO		3/1	NAIC	
	41	Trusteed Surplus Statement		ЕО	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
						Í		
		III. ELECTRONIC FILING REQUIREMENTS						
	61	Annual Statement Electronic Filing	XXX	EO	XXX	3/1	NAIC	
	62	March .PDF Filing	XXX	EO	XXX	3/1	NAIC	
	63	Risk-Based Capital Electronic Filing	XXX	EO	N/A	3/1	NAIC	
	64	Risk-Based Capital .PDF Filing	XXX	EO	N/A	3/1	NAIC	
	65	Combined Annual Statement Electronic Filing	XXX	EO	XXX	5/1	NAIC	
	66	Combined Annual Statement .PDF Filing	XXX	EO	XXX	5/1	NAIC	
	67	Supplemental Electronic Filing	XXX	EO	XXX	4/1	NAIC	
	68	Supplemental .PDF Filing	XXX	EO	XXX	4/1	NAIC	
	69	Quarterly Statement Electronic Filing	XXX	EO	XXX	5/15, 8/15, 11/15	NAIC	
	70	Quarterly .PDF Filing	XXX	EO	xxx	5/15, 8/15, 11/15	NAIC	
	71	June .PDF Filing	XXX	EO	XXX	6/1	NAIC	
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountants Letter of Qualifications		EO	N/A	6/1	Company	
	82	Audited Financial Reports	1	EO	N/A	6/1	Company	
	83	Audited Financial Reports Exemption Affidavit		N/A	N/A		Company	
	84	Communication of Internal Control Related Matters Noted in Audit		ЕО	N/A	8/1	Company	
	85	Independent CPA (change)		N/A	N/A		Company	
	86	Management's Report of Internal Control Over Financial Reporting		N/A	N/A	8/1	Company	
	87	Notification of Adverse Financial Condition		N/A	N/A	0,1	Company	
	88	Relief from the five-year rotation requirement for lead audit partner		EO		3/1	Company	
	89	Relief from the one-year cooling off period for independent CPA		ЕО		3/1	Company	
	90	Relief from the Requirements for Audit Committees		EO		3/1	Company	
	91	Request to File Consolidated Audited Annual Statements		N/A	N/A	3/1	Company	
	92	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting		N/A	N/A		Company	
		V. STATE REQUIRED FILINGS***		_	Į.	T	T ~	T
	101	Corporate Governance Annual Disclosure***		0			Company	
	102	Filings Checklist (with Column 1 completed)	1	0	1	4/1	State	
	103	Form B-Holding Company Registration Statement	1	0	N/A	6/1	Company	
	104	Form F-Enterprise Risk Report ****		0	1		Company	
	105	ORSA ****		0	1		Company	
	106	Premium Tax State Filing Fees		0	1	4/1	State	
	107	8	1 1	0	1	4/1 4/1	State	Note O
	108	Signed Jurat Group Capital Calculation (File with lead state only)	1	0	1	4/1	NAIC	Note O
	110	Assets Page	1	0	1	4/1	NAIC	Note O
	111	Liabilities, Surplus and Other Funds Page	1	0	1	4/1	NAIC	
	112	Statutory Page – Exhibit of Premiums and Losses (Direct Business in Guam)	1	0	1	4/1	NAIC	Note O
	113	Insurance Expense Exhibit Page	1	0	1	4/1	NAIC	Note O
	114	2% Assessment Fees on Commercial & Industrial Liability Premiums Written on Casualty & Property Risks Located in Guam (Form I-8)	1	0	1	4/1	State	11000 0

(1)	(2)	(3)	(4)		(5)	(6)	(7)	
			NUMB	ER OF CO	PIES*		FORM	APPLICABLE
Checklist	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	Dome	stic	Foreign	DUE DATE	SOURCE**	NOTES
			State	NAIC	State			
	115	Quarterly Automobile Assigned Risk Plan Report	1	0	1	On or before the 20 <sup>th</sup> of the month following the end of	State	Note P
						the quarter		

<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="https://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 not 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:	Ms. Alice P. Sebastian-Cruz Regulatory Programs Administrator Alice.Cruz@revtax.guam.gov
В	Mailing Address:	Guam Department of Revenue and Taxation Regulatory Division Insurance, Banking, Securities & Real Estate 1240 Army Drive Barrigada, GU 96913
С	Mailing Address for Filing Fees:	
D	Mailing Address for Premium Tax Payments:	
Е	Delivery Instructions:	Foreign Insurer: All filings must be made by the General Agent in behalf of the insurer and must be physically delivered at the Department.  If the State due date falls on a weekend or holiday, then the deadline is extended to the next business day.
F	Late Filings:	Annual Statement: Late filing fee of \$500.00 after 4/1 due date and additional \$100.00 per day if filed after 5/15 will apply. \$20.00 fee per report will be assessed for each required hard copy of statutory page/report that is filed separately.
G	Original Signatures:	Original (wet ink) signatures required.
Н	Signature/Notarization/Certification:	Appropriate notarization required on actual document.
I	Amended Filings:	Amended items must be accompanied by an explanation of the amendments. If there are signature requirements for the original filing, the same should be followed for any amendment.
J	Exceptions from normal filings:	,
K	Bar Codes (State or NAIC):	
L	Signed Jurat:	See Note O.
M	NONE Filings:	See NAIC Annual Statement Instructions.

N	Filings new, discontinued or modified materially since last year:	
O	Domestic Insurers:  Foreign Insurers:	In addition to the hard copy of the Annual Statement, a hard copy of the following pages is required to be submitted to the Department: (i) Jurat Page with signature, (ii) Assets Page, (iii) Liabilities, Surplus and Other Funds Page, (iv) Exhibit of Premiums and Losses - Direct Business in Guam – Statutory Page and Supplemental Health Care Exhibits (Parts 1 and 2) – Direct Business in Guam, Statutory Page, as applicable and (v) Insurance Expense Exhibit.
		Annual Statements: in CD Form or flash drive. Additionally, a hard copy of the following pages is required to be submitted to the Department: (i) Jurat Page with signature, (ii) Assets Page, (iii) Liabilities, Surplus and Other Funds Page, (iv) Exhibit of Premiums and Losses - Direct Business in Guam – Statutory Page and (v) Insurance Expense Exhibit.
P	Quarterly Automobile Assigned Risk Plan Report	Late filing fee of \$500.00 will apply.
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# 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 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 Supplemental Electronic Filing includes all supplements due April 1, per the Annual Statement Instructions.

The Supplemental.PDF Filing is the .pdf file for all supplemental schedules and exhibits due April 1.

The Quarterly Statement Electronic Filing includes the complete quarterly statement data.

The Quarterly Statement.PDF Filing is the .pdf file for quarterly statement data.

The *Combined Annual Statement Electronic Filing* includes the required pages of the combined annual statement and the combined Insurance Expense Exhibit.

The *Combined Annual Statement.PDF Filing* is the .pdf file for the Combined annual statement data and the combined Insurance Expense Exhibit.

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. 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.