

FRATERNAL SOCIETIES

COMPANY NAME: _____ NAIC Company Code: _____

Contact: _____ Telephone: _____

REQUIRED FILINGS IN THE STATE OF: **WEST VIRGINIA** Filings Made During the Year: **2011**

(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			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 1/2"x14")	0	EO	xxx	3/1	NAIC	B,E,F,G,I,J,M
	1.1	Printed Investment Schedule detail (Pages E01-E27)	0	EO	xxx	3/1	NAIC	B,E,F,G,I,J,M
	2	Quarterly Financial Statement (8 1/2" x 14")	0	EO	xxx	5/15, 8/15, 11/15	NAIC	B,I
	3	Separate Accounts Annual Statement (8 1/2"x 14")	0	EO	xxx	3/1	NAIC	B,I
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	0	EO	xxx	4/1	NAIC	B,I
	11	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	0	EO	xxx	3/1	Company	B,I
	12	Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII	0	EO	xxx	3/1	Company	B,I
	13	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	0	EO	xxx	3/1	Company	B,I
	14	Actuarial Opinion	0	EO	xxx	3/1	Company	B,I
	15	Actuarial Opinion on X-Factors	0	EO	xxx	3/1	Company	B,I
	16	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	0	EO	xxx	3/1	Company	B,I
	17	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	0	EO	xxx	3/1	Company	B,I
	18	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	0	EO	xxx	3/1	Company	B,I
	19	Analysis of Annuity Operations by Lines of Business	0	EO	xxx	4/1	NAIC	B,I
	20	Analysis of Increase in Annuity Reserves During Year	0	EO	xxx	4/1	NAIC	B,I
	21	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	0	EO	xxx	3/1	Company	B,I
	22	Health Care Exhibit (Parts 1, 2 and 3) Supplement	0	EO	xxx	4/1	NAIC	B,I
	23	Health Care Exhibit's Allocation Report Supplement	0	EO	xxx	4/1	NAIC	B,I
	24	Interest Sensitive Life Insurance Products Report	0	EO	xxx	4/1	NAIC	B,I
	25	Investment Risk Interrogatories	0	EO	xxx	4/1	NAIC	B,I
	26	Long-term Care Experience Reporting Forms	0	EO	xxx	4/1	NAIC	B,I
	27	Management Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII	0	EO	xxx	3/1	Company	B,I
	28	Management Discussion & Analysis	0	EO	xxx	4/1	Company	B,I
	29	Medicare Supplement Insurance Experience Exhibit	0	EO	xxx	3/1	NAIC	B,I
	30	Medicare Part D Coverage Supplement	0	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	B,I
	31	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	0	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	B,I
	32	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	0	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	B,I
	33	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	0	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	B,I
	34	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	0	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	B,I
	35	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	0	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	B,I
	36	Risk-Based Capital Report	0	N/A	xxx	3/1	NAIC	B,I
	37	RBC Certification required under C-3 Phase I	0	N/A	xxx	3/1	Company	B,I
	38	RBC Certification required under C-3 Phase II	0	N/A	xxx	3/1	Company	B,I
	39	Statement on non-guaranteed elements - Exhibit 5 Int. #3	0	EO	xxx	3/1	Company	B,I
	40	Statement on participating/non-participating policies - Exhibit 5, Inter. #1&2	0	EO	xxx	3/1		B,I
	41	Supplemental Compensation Exhibit	0	N/A	N/A	3/1	NAIC	
	42	Trusted Surplus Statement	0	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	B,I
		III. ELECTRONIC FILING REQUIREMENTS						
	50	Annual Statement Electronic Filing	0	1	xxx	3/1	NAIC	E
	51	March .PDF Filing	0	1	xxx	3/1	NAIC	E
	52	Separate Accounts Electronic Filing	0	1	xxx	3/1	NAIC	E
	53	Separate Accounts .PDF Filing	0	1	xxx	3/1	NAIC	E
	54	Supplemental Electronic Filing	0	1	xxx	4/1	NAIC	E
	55	Supplemental .PDF Filing	0	1	xxx	4/1	NAIC	E

56	Quarterly Statement Electronic Filing	0	1	xxx	5/15, 8/15 & 11/15	NAIC	E
57	Quarterly .PDF Filing	0	1	xxx	5/15, 8/15 & 11/15	NAIC	E
58	June .PDF Filing	0	1	xxx	6/1	NAIC	E
	IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
71	Accountants Letter of Qualifications	0	EO	N/A	6/1	Company	
72	Audited Financial Reports	0	EO	xxx	6/1	Company	B,I
73	Audited Financial Reports Exemption Affidavit	0	N/A	N/A	6/1	Company	
74	Communication of Internal Control Related Matters Noted in Audit	0	N/A	N/A	8/1	Company	
75	Independent CPA (change)	0	N/A	N/A	30 days after engagement	Company	
76	Management's Report of Internal Control Over Financial Reporting	0	N/A	N/A	8/1	Company	
77	Notification of Adverse Financial Condition	0	N/A	N/A	Immediately	Company	
78	Report of Significant Deficiencies in Internal Controls	0	N/A	N/A	8/1	Company	
79	Request for Exemption to File	0	N/A	1	Timely manner	Company	B
	V. STATE REQUIRED FILINGS						
101	Certificate of Compliance	0	0	1	6/1	State	B,AC
102	Certificate of Deposit	0	0	1	6/1	State	B,AC
103	Certificate of Valuation	0	0	1	6/1	State	B,AC
104	Filings Checklist (with Column 1 completed)	0	0	0	3/1	State	
105	Premium tax	0	0	0		State	
106	State Filing Fees	0	0	\$25	3/1	State	C,E,F,G,H,O,T,U
107	Signed Jurat	0	0	1	3/1	NAIC	B,I,L
108	Certificate of Authority Renewal Fee	0	0	\$50	3/1	Company	C,O,U
109	Certificate of Advertising Compliance	0	0	1	3/1	Company	B,AB
110	Examination Assessment Fee	0	0	1	7/1	State	O,Z

*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.

***Refer to the Notes & Instructions (below).

NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)		
A	Required Filings Contact Person:	Darlene Parsons Darlene.Parsons@wvinsurance.gov (304) 558-2100 (Financial Conditions)
B	Mailing Address: Mailing: PO Box 50540 Charleston, WV 25305-0540 Location: 1124 Smith Street, Room 102 Charleston, WV 25301	Domestic fraternal societies file hard copies of their annual statements. Foreign and alien fraternal societies need only file a signed Jurat. (See Note L)
C	Mailing Address : <u>For Filing Fees</u> Mailing: PO Box 50542 Charleston, WV 25305-0542 Location 1124 Smith Street, Room 100 Charleston, WV 25301	Phone: (304) 558-2100 – Tax Audit Section
D	Mailing Address: <u>Tax Payment Forms</u>	Not Applicable
E	Delivery Instructions:	All filings are due on or before the indicated due date. If due date falls on a weekend or holiday then the deadline is extended to the next business day.
F	Penalties for Late Filings:	Late filings are subject to penalty and interest imposed by W. Va. Code §33-43-7 and W. Va. Code §33-43-11.
G	Original Signatures:	Required signatures must be original signatures on all filings.
H	Signature/Notarization/Certification:	All forms must be signed and attested to where indicated.
I	Amended Filings:	Amended items must be filed with a complete explanation of each amendment. If there are signature requirements for the original filing, the same requirements apply to any amendment.
J	Exceptions from normal filings:	A request for extension must be filed not less than 10 days prior to the due date and provide sufficient detail.
K	Bar Codes (State or NAIC):	NAIC
L	Signed Jurat:	Foreign and alien licensed companies must file a signed Jurat page.
M	NONE Filings:	See NAIC Annual Statement Instructions. Exceptions to these instructions are noted on the form. Entities not subject to tax are not required to submit forms.
N	Filings new, discontinued or modified materially since last year:	None
O	Checks:	Make checks payable to: Offices of the WV Insurance Commissioner See Note C.
P	Computer Generated or Tax Software Packages:	Computer generated forms are acceptable if they are

		exact replicas of the forms prescribed by the Insurance Commissioner.
Q	Additional Copies:	If copies are required to be filed, file one (1) original and a copy as indicated.
R	HMO/PEIA Rates:	Not Applicable
S	Grievance Procedure:	File with: Consumer Services Division PO Box 50540 Charleston, WV 25305-0540
T	State Filing Fees:	Licensed fraternal companies must remit a \$25 annual statement filing fee with the signed Jurat.
U	COA Renewal Fees:	Licensed fraternal companies must remit payment on or before March 1. Remit COA renewal fee with the signed Jurat.
V	HMO Requirement:	Not Applicable
W	Special Instruction for foreign HMOs:	Not Applicable
X	Monthly Financial Statements:	Not Applicable
Y	Premium Taxes:	Licensed fraternal companies are tax exempt and not required to file returns.
Z	Mailing Address: <u>Examination Assessment Fee</u> West Virginia Insurance Commissioner STO/RPD PO Box 1861 Charleston, WV 25327	Fraternal societies must make remittance using only the Payment Form provided by this Office. Due date: On or before July 1 Phone: (304) 558-2100 – Tax Audit Section
AA	Premium Tax Penalties:	Licensed fraternal companies are tax exempt and not required to file returns.
AB	Certificate of Advertising Compliance:	Pursuant to W. V. C. S. R. 114-10-17.2, a Certificate of Advertising Compliance must be filed by all entities licensed to write accident and sickness insurance. Pursuant to W. V. C. S. R. 114-11-9.3, a Certificate of Advertising Compliance must be filed by all entities licensed to write life and annuities insurance. File certificates with the Annual Premium Tax Statement (Form IC-PT) or Application for License (Form A-10). The certificate must be filed even if no business was written. You may devise your own statement or use the form provided under General Forms at: http://www.wvinsurance.gov/Default.aspx?tabid=215
AC	Certificate of Compliance – Certificate of Deposit – Certificate of Valuation:	Foreign and alien licensed fraternal societies must file these certificates with the signed Jurat.
AD	State Page:	Not Applicable