

PROPERTY & CASUALTY INSURERS

COMPANY NAME: _____ NAIC Company Code: _____

Contact: _____ Telephone: _____

REQUIRED FILINGS IN THE STATE OF: Maryland Filings Made During the Year 2025

***DOMICILED COMPANIES – ALL 2024 ANNUAL STATEMENT AND 2025 QUARTERLY FILINGS ARE PERMITTED TO BE SUBMITTED ELECTRONICALLY. COMPANIES SHOULD RETAIN ONE HARD COPY TO BE FILED WITH THE MARYLAND INSURANCE ADMINISTRATION UPON REQUEST AT A LATER DATE. ELECTRONIC SIGNATURES WILL BE ACCEPTED. PLEASE SEE FILING INSTRUCTIONS BELOW**

(1) Checklist	(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 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, 8/15, 11/15	NAIC	
	3	Protected Cell Annual Statement	1	0	xxx	3/1	NAIC	
	4	Combined Annual Statement (8 ½" x 14")	1	EO	xxx	5/1	NAIC	
		II. NAIC SUPPLEMENTS						
	11	Accident & Health Policy Experience Exhibit	1	EO	xxx	4/1	NAIC	
	12	Actuarial Opinion	1	EO	xxx	3/1	Company	
	13	Actuarial Opinion Summary	1	N/A	xxx	3/15	Company	
	14	Bail Bond Supplement	1	EO	xxx	3/1	NAIC	
	15	Combined Insurance Expense Exhibit	1	EO		5/1	NAIC	
	16	Credit Insurance Experience Exhibit	1	EO	xxx	4/1	NAIC	
	17	Cybersecurity Insurance Coverage Supplement	1	EO	xxx	4/1	NAIC	
	18	Director and Officer Insurance Coverage Supplement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	19	Exhibit of Other Liabilities By Lines of Business as Reported on Line 17 of the Exhibit of Premiums and Losses	1	EO	xxx	3/1	NAIC	
	20	Financial Guaranty Insurance Exhibit	1	EO	xxx	3/1	NAIC	
	21	Insurance Expense Exhibit	1	EO	xxx	4/1	NAIC	
	22	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit, Parts 1 and 2	1	EO	xxx	4/1	NAIC	
	23	Long-Term Care Experience Reporting Forms	1	EO	xxx	4/1	NAIC	
	24	Management Discussion & Analysis	1	EO	xxx	4/1	Company	
	25	Market Conduct Annual Statement Premium Exhibit for Year	1	EO	xxx	3/1	Company	
	26	Medicare Part D Coverage Supplement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	27	Medicare Supplement Insurance Experience Exhibit	1	EO	xxx	3/1	NAIC	
	28	Mortgage Guaranty Insurance Exhibit						
	29	Premiums Attributed to Protected Cells Exhibit	1	EO	xxx	3/1	NAIC	
	30	Private Flood Insurance Supplement	1	EO	xxx	4/1	NAIC	
	31	Reinsurance Attestation Supplement	1	EO	xxx	3/1	Company	
	32	Exceptions to Reinsurance Attestation Supplement	1	N/A	xxx	3/1	Company	
	33	Reinsurance Summary Supplemental	1	EO	xxx	3/1	NAIC	
	34	Risk-Based Capital Report	1	EO	xxx	3/1	NAIC	
	35	Schedule SIS	1	N/A	N/A	3/1	NAIC	
	36	Supplement A to Schedule T	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	37	Supplemental Compensation Exhibit	xxx	N/A	N/A	3/1	NAIC	
	38	Supplemental Health Care Exhibit (Parts 1 and 2)	1	EO	xxx	4/1	NAIC	
	39	Supplemental Investment Risk Interrogatories	1	EO	xxx	4/1	NAIC	
	40	Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts	1	EO	xxx	3/1	NAIC	
	41	Trusteed Surplus Statement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
		III. ELECTRONIC FILING REQUIREMENTS						

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			Domestic		Foreign			
			State	NAIC	State			
	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	1	EO	xxx	6/1	Company	
	82	Audited Financial Reports	1	EO	xxx	6/1	Company	
	83	Audited Financial Reports Exemption Affidavit	1	N/A	xxx		Company	
	84	Communication of Internal Control Related Matters Noted in Audit	1	EO	xxx	8/1	Company	
	85	Independent CPA (change)	1	N/A	xxx		Company	
	86	Management's Report of Internal Control Over Financial Reporting	1	N/A	xxx	8/1	Company	
	87	Notification of Adverse Financial Condition	1	N/A	xxx		Company	
	88	Relief from the five-year rotation requirement for lead audit partner	1	EO	xxx	3/1	Company	
	89	Relief from the one-year cooling off period for independent CPA	1	EO	xxx	3/1	Company	
	90	Relief from the Requirements for Audit Committees	1	EO	xxx	3/1	Company	
	91	Request to File Consolidated Audited Annual Statements	1	N/A	xxx	6/1	Company	
	92	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	1	N/A	xxx	6/1	Company	
		V. STATE REQUIRED FILINGS***						
	101	Corporate Governance Annual Disclosure*** (see NOTES and INSTRUCTIONS below)	1	0	xxx	6/1	Company	Refer to Title 4, Subtitle % of the Insurance Article
	102	Holding Company registration Statement (forms B&C) (see NOTES and INSTRUCTIONS below)	1	0	xxx	5/1	State	Refer to Section 7-601 of Insurance Article
	103	Insurance Holding Company System Model Regulations, form F, Enterprise Risk Report (Model 450-27) (see NOTES and INSTRUCTIONS below)	1	0	xxx	7/1	State	Refer to section 7-603 (h) of the Insurance Article
	104	ORSA	1	0	xxx		Company	Refer to Title 32 of Insurance Article

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			Domestic		Foreign			
			State	NAIC	State			
	105	Premium Tax Statement	1	0	1	3/15	State	6-102 of the Insurance Article ANNUAL PREMIUM TAX STATEMENT FILINGS: IT IS RECOMMENDED THAT COMPANIES FILE THROUGH OPTINS. PLEASE SEE MIA WEBSITE FOR FURTHER INSTRUCTIONS. premiumtaxfiling.mia@maryland.gov
	106	Maryland Retaliatory Deposit Schedule (see NOTES and INSTRUCTIONS below)	1	0	xxx	4/1		For Arizona, California or Massachusetts companies writing Workers' Compensation in Maryland
	107	Certificate of Compliance for Advertising	1	0	1	3/1	State	https://marylandinsurance.jotform.com/233413921219047 Certificates of Compliance for Advertising – Advertisements of All Insurance Contracts Which Include Any Accident, Sickness, Hospital, Surgical or Medical Coverages COMAR 31.15.02.18
	108	Group Capital Calculation (File with lead state only)	1	0	0	5/1	State	§ 7-603 Bulletin 24-17 Annual Group Capital Calculation

*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 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 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: http://www.naic.org/public_lead_state_report.htm.

******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

*******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: http://www.naic.org/public_lead_state_report.htm**

		NOTES AND INSTRUCTIONS	
	A	Required Filings Contact Person: Attn: Lynn Beckner Holdingcompanyfiling.mia@maryland.gov	
	B	DOMESTIC COMPANIES - INSTRUCTIONS Electronic Filing Instructions: Completed Annual Statement, Quarterly Statement and related supplemental filings should be submitted to the Maryland Insurance Administration via email at: eafileings.mia@maryland.gov Holding company filings (Forms A, B, C, D, E, F, and Corporate Governance Annual Disclosure) should be submitted to the Maryland Insurance Administration via email at: holdingcompanyfiling.mia@maryland.gov	
	C	DOMESTIC COMPANIES - INSTRUCTIONS Electronic Signatures: Electronic filings should contain electronic signatures The MIA generally instructs companies to file certain documents in hard copy form with original (wet) signature, and in some cases sent via certified mail or first-class and with notary requirements. The hard copy, original (wet) signature, and related filing requirements are currently waived, however, companies are expected to file the documents electronically. The electronic filing should contain electronic signatures. The companies should retain a hard copy so that they can file the hard copy, at a later date if requested by the Maryland Insurance Administration. With respect to the hard copies to be filed, the requirement for wet signatures is waived.	
	D	Mailing Address: Examination and Auditing Unit Maryland Insurance Administration 200 St. Paul Place, Suite 2700 Baltimore, MD 21202	
	E	Mailing Address for Filing Fees: Maryland Insurance Administration Attn: Shanell Hurt Franklin or Spencer Harris Fiscal Unit 200 St. Paul Place, Suite 2700 Baltimore, MD 21202	
	F	Mailing Address for Premium Tax Payments: Maryland Insurance Administration Attn: Shanell Hurt Franklin or Spencer Harris Fiscal Unit 200 St. Paul Place, Suite 2700 Baltimore, MD 21202	
	G	Delivery Instructions: Electronic postmark on or before due date	
	H	Late Filings: Subject to penalty and interest	
	I	Original Signatures: Yes	Domestic insurers – electronic signatures will be accepted for all filings.
	J	Signature/Notarization/Certification: Yes	Domestic insurers – Notarization/Certification should be electronic, if possible.

	K	Amended Filings: Yes	
	L	Exceptions from normal filings: Approval must be in writing	
	M	Bar Codes (State or NAIC): NAIC	
	N	Signed Jurat:	Signed Jurat page is no longer required for foreign insurers. Domestic insurers – Jurat page should contain electronic signatures.
	O	NONE Filings: Yes	
	P	Filings new, discontinued or modified materially since last year: Yes	
	Q	Line 103, Insurance Holding Company System Model Regulation, Form F, Enterprise Risk Report (Model 450-27)	Refer to Section 7-603(h) of the Insurance Article.
	R	Retaliatory Deposit Schedule	Email to Matt.Kozak@maryland.gov
	S	Additional Questions:	Refer to “Reports due from Regulated entities to the Maryland Insurance Administration” found on the Mia website at http://insurance.maryland.gov/Insurer/Pages/companyfilingRequirements.aspx , under Summary of Maryland Required Filings

**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 before submitting a filing.