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Date: December 1, 2010  
To: All Licensed or Authorized Companies  
From: Glenn Wilson, Commissioner, Minnesota Department of Commerce,  
85 7<sup>th</sup> Place East, Suite 500, Saint Paul, Minnesota 55101-2198  
Subject: Filing of Annual Statement, Supplements, Exhibits, Certificates and Reports

Pursuant to Minn. Stat. §60A.13, subd. 1, every insurance company, including fraternal benefit societies, and reciprocal exchanges, doing business in the State of Minnesota, must file with the Commissioner, annually, on or before March 1, the appropriate verified National Association of Insurance Commissioner's (NAIC) annual statement blank, prepared in accordance with the NAIC's instructions handbook and following those accounting procedures and practices prescribed by the NAIC's *Accounting Practices and Procedures Manual*. In addition, pursuant to Minn. Stat. §60A.13, subd. 1, the Commissioner may require the filing of any other information determined to be reasonably necessary for the continued enforcement of insurance laws.

The Commissioner is requiring that the annual statement and other filings, as noted on the filings checklist, be filed in electronic format with the NAIC. Electronic format is intended to include filing on diskette or filing via the Internet. The Department encourages companies to take advantage of the Internet filing option with the NAIC. For more information on filing via the Internet, visit the NAIC Internet filing website at: [http://www.naic.org/industry\\_financial\\_filing.htm](http://www.naic.org/industry_financial_filing.htm)

### **Domestic Companies**

*Please complete all required Notes to the Financial Statement in electronic format, especially Note 1 which discloses any state prescribed or permitted practices and the impact on surplus and net income. By not completing this note, the NAIC electronic database shows the Net Income and Statutory Surplus each to be \$0 for the company.*

### **Foreign Companies**

*Please note that Foreign Companies are no longer required to file hard copies of their Annual Statements and Supplements, Quarterly Statements and Audited Financial Statements, unless requested by the Department under separate cover. Hard copies of the State required filings should continue to be filed with the Minnesota Department of Commerce.*

An insurer may not transact any new business in the State of Minnesota after May 31 in any year unless it shall have previously transmitted its annual statement to the Commissioner and/or to the NAIC.

The mailing address for the Minnesota Department of Commerce appears in the Notes and Instructions. Any filings mailed to another Minnesota governmental office or address will not be considered filed with this Department. Fines may be assessed if items are filed incorrectly. Companies will not be sent an invoice for their renewal fees. Please consult the filings checklist for further information.

**Minnesota Department of Commerce Website:**

[www.insurance.mn.gov](http://www.insurance.mn.gov): Pick & Go>Financial Filing Instructions>Annual Statements>Select Company Type.

**General Instructions  
For Companies to Use Checklist**

**Please Note:** Minnesota's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will not be sending its 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)**

Minnesota **does not** require the filing of this checklist.

**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 *Separate Accounts Electronic Filing* includes the separate accounts annual statement and investment schedule detail.

The *Separate Accounts .PDF Filing* is the .pdf file for the separate accounts annual statement and all investment schedule detail.

The *Supplemental Electronic Filing* includes all supplements due April 1, per the *Annual Statement Instructions*.

The *Supplement .PDF Filing* is the .pdf file for all supplemental schedules and exhibits 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.

**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. If XXX appears in the "Number of Copies" "Foreign" "State" column, Minnesota does not require this filing, as long as hard copy is filed with the state of domicile and the data is filed electronically with the NAIC. If N/A appears in the "Number of Copies" column, the filing is not required.

**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,” Minnesota will provide the forms with the filing instructions via the Internet. 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.

**LIFE, ACCIDENT AND HEALTH INSURERS  
AND ACCREDITED LIFE REINSURERS**

Company Name: \_\_\_\_\_ NAIC Company Code: \_\_\_\_\_

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

**REQUIRED FILINGS IN THE STATE OF: Minnesota**

**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				
		<b>I. NAIC FINANCIAL STATEMENTS</b>						
	1	Annual Statement (8 1/2"x14")	2	EO	xxx	3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E27)	2	EO	xxx	3/1	NAIC	Note O.
	2	Quarterly Financial Statement (8 1/2" x 14")	2	EO	xxx	5/15, 8/15, 11/15	NAIC	
	3	Separate Accounts Annual Statement (8 1/2"x14")	2	EO	xxx	3/1	NAIC	
		<b>II. NAIC SUPPLEMENTS</b>						
	10	Accident & Health Policy Experience Exhibit	2	EO	xxx	4/1	NAIC	
	11	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	0	EO	xxx	3/1	Company	
	12	Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII	0	EO	xxx	3/1	Company	Note M.
	13	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	0	EO	xxx	3/1	Company	Note M.
	15	Actuarial Opinion on X-Factors	0	EO	xxx	3/1	Company	
	16	Actuarial Opinion on Separate Accounts Funding	0	EO	xxx	3/1	Company	
	17	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	0	EO	xxx	3/1	Company	
	18	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	0	EO	xxx	3/1	Company	Note M.
	19	Analysis of Annuity Operations by Lines of Business	0	EO	xxx	4/1	NAIC	Note M.
	20	Analysis of Increase in Annuity Reserves During Year	0	EO	xxx	4/1	NAIC	Note M.
	21	Credit Insurance Experience Exhibit	2	EO	xxx	4/1	NAIC	
	22	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	0	EO	xxx	3/1	Company	Note M.
	23	Health Care Exhibit (Parts 1, 2, and 3) Supplement	0	EO	xxx	4/1	NAIC	Note M.
	24	Health Care Exhibit's Allocation Report Supplement	0	EO	xxx	4/1	NAIC	Note M.
	25	Interest Sensitive Life Insurance Products Report	0	EO	xxx	4/1	NAIC	
	26	Investment Risk Interrogatories	2	EO	xxx	4/1	NAIC	
	27	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit	2	EO	xxx	4/1	NAIC	
	28	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit Adjustment Form	2	EO	xxx	4/1	NAIC	
	29	Long Term Care Experience Reporting Forms	2	EO	xxx	4/1	NAIC	
	30	Management's Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLII	0	EO	xxx	3/1	Company	Note M.
	31	Management Discussion & Analysis	2	EO	xxx	4/1	Company	
	32	Medicare Supplement Insurance Experience Exhibit	2	EO	xxx	3/1	NAIC	
	33	Medicare Part D Coverage Supplement	2	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	34	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	0	EO	xxx	5/15, 8/15, 11/15	Company	
	35	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	0	EO	xxx	5/15, 8/15, 11/15	Company	
	36	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	0	EO	xxx	5/15, 8/15, 11/15	Company	
	36	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	0	EO	xxx	5/15, 8/15, 11/15	Company	
	37	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	0	EO	xxx	5/15, 8/15, 11/15	Company	
	38	Risk-Based Capital Report	1	EO	N/A	3/1	NAIC	
	39	RBC Certification required under C-3 Phase I	0	EO	xxx	3/1	Company	
	40	RBC Certification required under C-3 Phase II	0	EO	xxx	3/1	Company	
	41	Schedule SIS	2	N/A	N/A	3/1	NAIC	
	42	Statement of Actuarial Opinion	2	EO	xxx	3/1	Company	Note P and Note Q.
	43	Statement on non-guaranteed elements – Exhibit 5 Int. #3	2	EO	xxx	3/1	Company	
	44	Statement on par/non-par policies – Exhibit 5 Int. 1&2	2	EO	xxx	3/1	Company	
	45	Supplemental Compensation Exhibit	2	N/A	N/A	3/1	NAIC	
	46	Supplemental Schedule O	2	EO	xxx	3/1	NAIC	
	47	Trusteed Surplus Statement	N/A	EO	xxx	3/1, 5/15, 8/15, 1/15	NAIC	
	48	Workers' Compensation Carve Out Supplement	0	EO	xxx	3/1	NAIC	

**\*If XXX appears in this column, Minnesota does not require this filing, as long as hard copy is filed with the state of domicile and the data is filed electronically with the NAIC. If N/A appears in this column, the filing is not required. EO (electronic filing only).**

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

**REQUIRED FILINGS IN THE STATE OF: Minnesota**

**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			
		<b>III. ELECTRONIC FILING REQUIREMENTS</b>						
	40	Annual Statement Electronic Filing	N/A	1	N/A	3/1	NAIC	
	41	March .PDF Filing	N/A	1	N/A	3/1	NAIC	
	42	Risk-Based Capital Electronic Filing	N/A	1	N/A	3/1	NAIC	
	43	Risk-Based Capital .PDF Filing	N/A	1	N/A	3/1	NAIC	
	44	Separate Accounts Electronic Filing	N/A	1	N/A	3/1	NAIC	
	45	Separate Accounts .PDF Filing	N/A	1	N/A	3/1	NAIC	
	46	Supplemental Electronic Filing	N/A	1	N/A	4/1	NAIC	
	47	Supplemental .PDF Filing	N/A	1	N/A	4/1	NAIC	
	48	Quarterly Electronic Filing	N/A	1	N/A	5/15, 8/15, 11/15	NAIC	
	49	Quarterly .PDF Filing	N/A	1	N/A	5/15, 8/15, 11/15	NAIC	
	50	June .PDF Filing	N/A	1	N/A	6/1	NAIC	
		<b>IV. AUDIT/INTERNAL CONTROL RELATED REPORTS</b>						
	51	Accountant's Letter of Qualifications	1	EO	xxx	6/1	Company	MN Stat. 60A.1291
	52	Audited Financial Statements	1	EO	xxx	6/1	Company	MN Stat. 60A.1291
	53	Audited Financial Statements Exemption Affidavit	N/A	0	N/A	N/A	Company	MN Stat. 60A.1291
	54	Communication of Internal Control Related Matters Noted in Audit	1	N/A	N/A	8/1	Company	Note M.
	55	Independent CPA (change)	1	0	N/A	6/1	Company	MN Stat. 60A.1291
	56	Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	Note M.
	57	Notification of Adverse Financial Condition	1	0	1	Within 5 days of receipt	Company	MN Stat. 60A.1291
	58	Report of Significant Deficiencies in Internal Controls	1	0	N/A	8/1	Company	MN Stat. 60A.1291
	59	Request for Exemption to File	1	0	N/A	5/1	Company	MN Stat. 60A.1291 Note J.
	60	Request to File Consolidated Audited Financial Statements	1	0	1	12/31/09	Company	MN Stat. 60A.1291
		<b>V. STATE REQUIRED FILINGS</b>						
	101	Required Filings for use of Preferred Class Structure Mortality Tables	1	0	1	3/1	Company	MN Stat. 61A.257 Note R.
	102	Certificate of Compliance	N/A	0	1	3/1	Company	Note S.
	103	Certificate of Deposit	N/A	N/A	1	3/1	Company	Note S and Note T.
	104	Certificate of Valuation	N/A	N/A	1	3/1	Company	MN Stat. 61A.25 Note S.
	105	Credit Insurance Annual Report	2	N/A	1	4/1	State	MN Stat. 62B.07
	106	Filings Checklist (with Column 1 completed)	0	0	N/A	3/1	State	
	107	Holding Company Annual Registration Statement (Form B and Form C)	2	N/A	N/A	6/1	Company	MN Stat. 60D.19
	108	Investment Policy Certification	2	N/A	N/A	3/1	State	MN Stat. 60A.112 Note U.
	109	Life, Annuity and A&H Policy Count and Liabilities	2	N/A	1	3/1	State	MN Stat. 60A.13
	110	Report by Independent CPA Regarding Application of Valuation Procedures	1	N/A	N/A	6/1	Company	MN Stat. 60A.124
	111	Statement Filing Fees	1	N/A	1	3/31	State	Note V. and Note M.
	112	Signed Jurat	xxx	xxx	xxx	3/1, 5/15, 8/15, 11/15	NAIC	Note G.

\*If XXX appears in this column, Minnesota does not require this filing, as long as hard copy is filed with the state of domicile and the data is filed electronically with the NAIC. If N/A appears in this column, the filing is not required. EO (electronic filing only).

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

		<b>NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)</b>	
	A	Required Annual Statement Filings Contact Person:	<ul style="list-style-type: none"> <li>See the contact list.</li> </ul>
	B	Mailing Address:	Minnesota Department of Commerce Financial Institutions – Insurance 85 7 <sup>th</sup> Place East, Suite 500 Saint Paul, MN 55101-2198
	C	Mailing Address for Filing Fees:	Minnesota Department of Commerce 85 7 <sup>th</sup> Place East, Suite 500 Saint Paul, MN 55101-2198
	D	Mailing Address for Premium Tax Payments:	Minnesota Department of Revenue 600 North Robert Street Saint Paul, MN 55101 Contact Person: Jerry Sieve (651) 556-4729
	E	Delivery Instructions:	<ul style="list-style-type: none"> <li>All filings must be physically received at the address in Note B no later than the indicated due date per MN Stat. 60A.02.</li> <li>If the due date falls on a weekend or holiday, the deadline is extended to the next business day.</li> </ul>
	F	Late Filings:	<ul style="list-style-type: none"> <li>Companies will be fined \$100 per day for a late annual statement filing per MN Stat. 72A.061.</li> <li>A company’s license may be suspended if the annual statement is received more than 45 days late per MN Stat. 72A.061.</li> <li>Companies may be fined \$25 per day for any of the other filings not received by the due date per MN Stat. 72A.061.</li> <li>If a company has permission from its state of domicile to file any item late, this Department must receive a copy of the document granting the permission 10 days prior to the related filing due date shown in these instructions.</li> </ul>
	G	Original Signatures:	<ul style="list-style-type: none"> <li>Any signatures or notarizations required on filings from domestic companies must be original.</li> <li>Foreign companies should follow the instructions in the NAIC’s <i>Annual Statement Instructions</i>.</li> </ul>
	H	Signature/Notarization/Certification:	<ul style="list-style-type: none"> <li>The following officers are required to sign the annual statement for domestic companies only: President; Secretary; Treasurer.</li> </ul>
	I	Amended Filings:	<ul style="list-style-type: none"> <li>Any <b>domestic insurer</b> filing amended Annual Statement information must file the following items with the Minnesota Department of Commerce: a copy of the amended pages of the statement; an amended jurat page noting the filing of the amendment; and a letter of explanation of the nature and source of the changes made.</li> <li>Amended items must be filed within 10 days of their amendment, along with an explanation of the amendment.</li> <li>If there are signature requirements for the original filing, the same requirements apply to the amendment.</li> </ul>
	J	Exceptions from Normal Filings:	<ul style="list-style-type: none"> <li>A foreign company must supply a written copy of any exemption or extension received by its state of domicile at least 10 days prior to the filing due date to receive such exemption/extension from Minnesota. See Note F.</li> <li>Domestic companies should apply at least 30 days prior to the due date.</li> </ul>
	K	Bar Codes (State or NAIC):	<ul style="list-style-type: none"> <li>Follow the instructions in the Appendix of the NAIC Annual Statement Instructions for NAIC required filings.</li> <li>Bar Codes for Minnesota state specific filings <b>are not</b> required. (Lines 101 through 112 above).</li> </ul>
	L	NONE Filings:	<ul style="list-style-type: none"> <li>See NAIC <i>Annual Statement Instructions</i>.</li> <li>All Minnesota state specific forms should be completed and filed with either the pertinent information or a “NONE” on the form. Exceptions to these instructions are noted on the form.</li> </ul>
	M	Filings New, Discontinued or Modified Materially since Last Year:	New: <ul style="list-style-type: none"> <li>NAIC has added Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII.</li> <li>NAIC has added Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII.</li> <li>NAIC has added Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation.</li> <li>NAIC has added Analysis of Annuity Operations by Lines of Business.</li> <li>NAIC has added Analysis of Increase in Annuity Reserves during year.</li> <li>NAIC has added Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII.</li> <li>NAIC has added Health Care Exhibits (Parts 1, 2, and 3) Supplement.</li> <li>NAIC has added Health Care Exhibit’s Allocation Report Supplement.</li> </ul>

		<b>NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)</b>	
	M	Filings New, Discontinued or Modified Materially since Last Year:	<ul style="list-style-type: none"> <li>• NAIC has added Management’s Certification that the Valuation Reflects Management’s Intent required by Actuarial Guideline XLII.</li> <li>• NAIC has added Communication of Internal Control Matters Noted in Audit.</li> <li>• NAIC has added Management’s Report of Internal Control over Financial Reporting.</li> <li>• Minnesota has added</li> <li>• NEW RENEWAL FEE AMOUNT – renewal fees now include a surcharge collected on behalf of MN Office of Enterprise Technology.</li> </ul>
	N	Annual Statement:	<ul style="list-style-type: none"> <li>• The Annual Statement and Trusteed Surplus Statement must be filed by all life insurers incorporated under the laws of Canada or its provinces and authorized to do business in the State of Minnesota. In addition, the annual statement filed with Canadian regulatory authorities must be filed with this Department.</li> </ul>
	O	Investment Schedule Detail	<ul style="list-style-type: none"> <li>• Investment schedule detail (Checklist Line # 1.1 above), is required to be filed in hard copy by domestic companies with the Minnesota Department of Commerce. Please note that an additional copy is not required if these investment schedules are already bound in the Annual Statement.</li> </ul>
	P	Statement of Actuarial Opinion:	<ul style="list-style-type: none"> <li>• Reserves and liabilities that are reported in the annual statement filed in Minnesota, and which are certified in the statement of actuarial opinion, must be in compliance with all Minnesota reserving requirements, regardless of the policy or contract issue date. If Minnesota reserving requirements are silent, the reserving requirements found in the <i>NAIC Accounting Practices and Procedures Manual</i> shall apply for all policies and contracts issued 1/1/01, and later, and are encouraged to be utilized for prior issues.</li> </ul>
	Q	Notification of Change in Appointed Actuary	<ul style="list-style-type: none"> <li>• The documentation for an appointment needs to include the following: <ul style="list-style-type: none"> <li>• Documentation regarding the reason for the change in appointed actuaries, as required by MN Stat. §61A.25, sub. 2a(f), and MN Rules, chapter 2711.0050, subpart 3.</li> <li>• A copy of the resolution by the company’s Board of Directors, as required by MN Stat. §61A.25, sub. 2a(f).</li> <li>• Documentation stating that the appointed actuary meets all of the requirements for a “qualified actuary”, as set forth in MN Rules, chapter 2711.0050, subpart 2.</li> </ul> </li> </ul> <p>Please provide the requested information electronically by emailing it to a special email box we have established for these appointments (and illustration actuary filings): <a href="mailto:insurance.actuary@state.mn.us">insurance.actuary@state.mn.us</a></p>
	R	Required filings to use Preferred Class Structure Mortality Tables:	<ul style="list-style-type: none"> <li>• Annual present value certifications</li> <li>• Statistical reports regarding mortality and other information</li> </ul> <p><u>Note: Not required for 2010</u></p> <ul style="list-style-type: none"> <li>• Disclosure of any aggregate accounting adjustments to meet conditions in MN Stat. 61A.257, subd. 3</li> <li>• Contact person: Blaine Shepherd Telephone: (651) 282-2613 E-Mail: <a href="mailto:Blaine.Shepherd@state.mn.us">Blaine.Shepherd@state.mn.us</a></li> </ul>
	S	Certificate of Compliance, Certificate of Valuation and Certificate of Deposit Due Date:	<ul style="list-style-type: none"> <li>• These certificates must be filed by March 1, annually, if available, or within ten (10) days after receipt of original certification from state of domicile.</li> </ul>
	T	Certificate of Deposit:	<ul style="list-style-type: none"> <li>• A Certificate of Deposit must be a certification of funds on deposit for the protection of <b>all</b> policyholders.</li> </ul>
	U	Investment Policy Certification:	<ul style="list-style-type: none"> <li>• Domestic companies should complete the state-provided form for Investment Policy Certification included with these instructions.</li> </ul>
	V	Statement Filing Fees:	<ul style="list-style-type: none"> <li>• Companies will not be billed. See renewal information in state forms section.</li> <li>• Contact person for statement filing fees: Sue Porter Telephone: (651) 296-6907 E-mail: <a href="mailto:Sue.Porter@state.mn.us">Sue.Porter@state.mn.us</a></li> </ul>

## Mailing Addresses

**Annual Statement Mailing Address**  
Minnesota Department of Commerce  
Financial Institutions – Insurance  
85 7<sup>th</sup> Place East, Suite 500  
Saint Paul, MN 55101-2198

**Filing Fees Mailing Address**  
Minnesota Department of Commerce  
85 7<sup>th</sup> Place East, Suite 500  
Saint Paul, MN 55101-2198

**Premium Tax Payment Mailing Address**  
Minnesota Department of Revenue  
600 North Robert Street  
Saint Paul, MN 55101

## Annual Statement Filing Contacts

**P&C, Accredited Reinsurers, Foreign Surplus Lines,  
Title, and Reciprocal Companies**

Contact: Kathleen Foley  
Phone: (651) 297-7686  
E-mail: [Kathleen.Foley@state.mn.us](mailto:Kathleen.Foley@state.mn.us)

**Life and A&H Companies  
and Fraternal Benefit Societies**

Contact: Kathleen Foley  
Phone: (651) 297-7686  
E-mail: [Kathleen.Foley@state.mn.us](mailto:Kathleen.Foley@state.mn.us)

**HMDIs, Health and HMOs**

Contact: Constance Peterson  
Phone: (651) 297-8943  
E-mail: [Constance.Peterson@state.mn.us](mailto:Constance.Peterson@state.mn.us)

## Special Request Contacts

**Certified Copies of Documents**

Contact: Margie Pinedo  
Phone: (651) 296-4976  
E-mail: [Margie.Pinedo@state.mn.us](mailto:Margie.Pinedo@state.mn.us)

**Policy Forms and Filings for  
Life Insurance Companies**

Contact: Tammy Lohmann  
Phone: (651) 296-2327  
E-mail: [Tammy.Lohmann@state.mn.us](mailto:Tammy.Lohmann@state.mn.us)

**Policy Forms and Filings for  
Property & Casualty Companies**

Contact: Bob Boyce  
Phone: (651) 296-0139  
E-mail: [Bob.Boyce@state.mn.us](mailto:Bob.Boyce@state.mn.us)

**Premium Tax Payment  
Questions**

Contact: Jerry Sieve  
Phone: (651) 556-4729  
E-mail: [Jerry.Sieve@state.mn.us](mailto:Jerry.Sieve@state.mn.us)

**Questions on Modified Guaranteed  
Annuities Actuarial Opinion**

Contact: Blaine Shepherd  
Phone: (651) 282-2613  
E-mail: [Blaine.Shepherd@state.mn.us](mailto:Blaine.Shepherd@state.mn.us)

**Company Application Questions**

Contact: Sue Porter  
Phone: (651) 296-6907  
E-mail: [Sue.Porter@state.mn.us](mailto:Sue.Porter@state.mn.us)

**Statement Filing Fees, Mailing Address  
Changes, Amendments to Bylaws  
and Articles of Incorporation**

Contact: Sue Porter  
Phone: (651) 296-6907  
E-mail: [Sue.Porter@state.mn.us](mailto:Sue.Porter@state.mn.us)

**Questions on Filing of Credit  
Insurance Annual Report**

Contact: Julia Philips  
Phone: (651) 296-8949  
E-mail: [Julia.Philips@state.mn.us](mailto:Julia.Philips@state.mn.us)

**CREDIT INSURANCE ANNUAL REPORT(Minnesota Business Only)  
(Pursuant to Minnesota Statutes, Section §62B.07, subd. 8)**

**12/31/10**

Company: \_\_\_\_\_

The following information is required by Minnesota statutes as a supplement to the NAIC Credit Insurance Experience Exhibit. All companies writing credit insurance in Minnesota must file this form with our Department.

1. Claims incurred, premiums earned, and expenses (other than claims) shown separately for policies sold at each premium rate used by the insurer.

2. Does this company apply or has it applied underwriting criteria to this business? ==> Yes\_\_\_ No\_\_\_

If Yes, describe and/or attach copy of applications:

<u>Policy or Cert.</u>	<u>Criteria Description</u>
a.	a.
b.	b.
c.	c.
d.	d.



(Attach extra pages in same format as needed for complete response.)

3. Compensation paid for this business:

<u>Premiums Written</u>	<u>Compensation Paid</u>	<u>Name/Address of Person or Company Paid</u>
a.	a.	a.
b.	b.	b.
c.	c.	c.
d.	d.	d.



(Attach extra pages in the same format as needed for complete response. Premiums written and compensation paid should agree with corresponding items in NAIC experience exhibit form. Compensation includes pecuniary or nonpecuniary remuneration of any kind relating to the sale or renewal of the policy or certificate, including but not limited to bonuses, gifts, prizes, awards, dividends, experience refunds, retrospective commissions, finder's fees, and increased or decreased prices for other transactions with the insurer.

**IMPORTANT INSTRUCTIONS:**

1. This report must include data for coverage regulated by Minnesota statutes, chapter 62B, and sold in Minnesota or to a Minnesota resident.
2. Data must be shown separately for coverage periods of 5 years and under and for over 5 years.
3. Data must be shown separately for each rate for each policy form or certificate form used for credit insurance regulated as above. Use format of the NAIC form to comply with requirement #1.

If further information is required, phone Julia Philips at (651) 296-8949; or E-mail her at Julia.Philips@state.mn.us

The report should be filed with: Minnesota Department of Commerce, Financial Institutions-Insurance, 85 7<sup>th</sup> Place East, Suite 500, Saint Paul, MN 55101-2198

**MUST BE FILED ON OR BEFORE APRIL 1, ANNUALLY**

NAIC # \_\_\_\_\_

**INVESTMENT POLICY CERTIFICATION**  
(Pursuant to Minnesota Statutes §60A.112)

\_\_\_\_\_  
(Company Name)

\_\_\_\_\_ hereby certifies that:  
(Authorized Officer Name, Title)

1. The Company has a written investment policy meeting the requirements of Minnesota Statutes §60A.112.
2. The Company's board of directors has reviewed and approved or reapproved the investment policy during the year 2010.
3. The Company's board of directors performed a compliance review and made the written determination required by Minnesota Statutes §60A.112 for the year 2010. The written determination was adopted on \_\_\_\_\_.  
(date)

\_\_\_\_\_  
Signature of Authorized Officer

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
Date

**MUST BE FILED ON OR BEFORE MARCH 1, ANNUALLY**

# LIFE, ANNUITY AND ACCIDENT & HEALTH POLICY COUNT AND LIABILITIES

for year ended December 31, 2010

<b>NAIC #</b>
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(Please Provide Information Related to Minnesota Direct Business Only)

Company Name: \_\_\_\_\_

Person Completing this Form: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Column	(1)	(2)	(3)	(4)	(5)	(6)	(7)
Lines of Business	Number of Policies or Contracts	Number of Certificates if Group	Amount In-Force (Life Ins.)	Gross Reserves	Gross Claim Liability	Reinsurance Ceded	Net Reserves (4) + (5) - (6) = (7)
* Life *							
Industrial & Ordinary		---					
Group							
Credit							
<b>Life - TOTAL</b>							
* Annuities & * Supplementary Contracts							
Individual		---	---				
Group			---				
<b>Annuities - TOTAL</b>							
* A&H *							
Individual		---	---				
Group			---				
Credit			---				
<b>A&amp;H - TOTAL</b>							
Deposit-Type Contracts							

1. Total number of nationwide policyholders or certificate holders \_\_\_\_\_.

2. Synthetic GICs - Minnesota Business Only included in Exhibit 5, footnote #7:

Number of Policies \_\_\_\_\_ Assets \_\_\_\_\_ Reserves \_\_\_\_\_ Location \_\_\_\_\_

**The 2010 annual statement locations for Life, Annuity and Accident & Health Policy Count and Liabilities are listed below. Complete the other side of this form using information related to Minnesota Direct Business Only.**

Column	(1)	(2)	(3)	(4)	(5)	(6)	(7)
Lines of Business	Number of Policies or Contracts	Number of Certificates if Group	Amount In-Force (Life Ins.)	Gross Reserves	Gross Claim Liability	Reinsurance Ceded	Net Reserves (4) + (5) - (6) = (7)
Life				EXB 5 0199997 + 0499997 + 0599997 + 0699997 + 0799997	EXB 8, Pt 1 L4.1	EXB 5 0199998 + 0499998 + 0599998 + 0699998 + 0799998	
Industrial & Ordinary	P25,L21,C1&3	---	P25, L21, C2&4	C3 & 4	C2 & 3	C3 & 4	
Group	P25,L21,C7	P25, L21, C8	P25, L21, C9	C6	C7	C6	
Credit	P25,L21,C5		P25, L21, C6	C5	C6	C5	
<b>Life – TOTAL</b>							
<i>Annuities &amp; Supplementary Contracts</i>				EXB 5 0299997 + 0399997	EXB 8, Pt 1 L4.1	EXB 5 0299998 + 0399998	
Individual (Annuities & Suppl. Contracts)	P27, L9, C1&2	---	---	C3 & C4	C4&5	C3 & C4	
Group (Annuities)	P27, L9, C3	P27, L9, C4	---	C5 & C6	C8	C5 & C6	
<b>Annuities - TOTAL</b>							
<i>A&amp;H</i>				EXB 6 L7+L14	EXB 8, Pt 1 L4.1	EXB 6 L8 + L15	
Individual	P27, L10, C5	---	---	C1-(C2+C3)	C11	C1- (C2 + C3)	
Group		P27, L10, C1	---	C2	C9	C2	
Credit	P27, L10, C3		---	C3	C10	C3	
<b>A&amp;H – TOTAL</b>							
<i>DEPOSIT-TYPE CONTRACTS</i>	P27, L9, C1			P3, L3, C1			

Insurance Company Renewal Information

**NOTE NEW FEES**

**DO NOT MAIL YOUR CHECK WITH  
THE ANNUAL FINANCIAL FILING,  
PREMIUM TAX RETURN OR ANY OTHER DOCUMENTS**

**(Please forward to license renewal personnel for payment of fees)**

The annual statement/insurance company renewal fees are stated in Minn.Stat. 60A.14, subd. 1 (and in Minn. Stat. 60A.092, subd. 3(4) for accredited reinsurers). **A new surcharge is being collected on behalf of the MN Office of Enterprise Technology (OET) to fund a statewide electronic licensing system pursuant to Minn. Stat. 16E.22.**

The Department **will not be issuing invoices or reminders** to insurance companies. Please print this page and return it with your check made payable to the Minnesota Department of Commerce. This page must be included with each check. A separate check must be issued for each insurance company. Please submit your payment by **March 31, 2011**, based on your company type as listed below.

Domestic companies (life, fraternal, property/casualty, reciprocal, title)	\$857.50*
Foreign property/casualty, reciprocal, and title companies	\$857.50*
Foreign life companies	\$907.50**
Foreign fraternal companies, except: Pennsylvania renewal is \$907.50	\$857.50*
Accredited reinsurers	\$247.50***
Eligible surplus lines insurers (foreign and alien), \$330 except as noted below: Alaska renewal is \$630 California renewal is \$3,826 Maryland renewal is \$2,030 North Carolina renewal is \$530 Ohio renewal is \$1,030 Oklahoma renewal is \$680 Arkansas renewal is \$580	\$330.00****

\* \$575 COA, \$225 annual statement, \$57.50 OET surcharge

\*\* \$575 COA, \$225 annual statement, \$50 certificate of valuation, \$57.50 OETsurcharge

\*\*\* \$225 renewal/annual statement, \$22.50 OET surcharge

\*\*\*\*\$300 annual renewal of eligibility, \$30.00 OETsurcharge

If you have any questions regarding renewal fees, contact Susan Porter at (651) 296-6907 or e-mail at Sue.Porter@state.mn.us.

\_\_\_\_\_  
Full Name of Insurance Company

\_\_\_\_\_  
NAIC Number

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Amount of Check

**Mail Payment to:**

Minnesota Dept. of Commerce  
Financial Institutions Division  
85 7<sup>th</sup> Place East, Suite 500  
St. Paul, MN 55101-2198