

TITLE COMPANIES

COMPANY NAME: _____ NAIC Company Code: _____
 Contact: _____ Telephone: _____
 REQUIRED FILINGS IN THE STATE OF: ARIZONA Filings Made During the Year 2025

(1) Check- List	(2) Line #	(3) REQUIRED FILING FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE* *	(7) APPLICABLE NOTES
			Domestic State	NAIC	Foreign State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 1/2" x 14")	xxx	EO	xxx	3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E29)	xxx	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC	
		II. NAIC SUPPLEMENTS						
	11	Actuarial Opinion	xxx	EO	xxx	3/1	Company	
	12	Investment Risk Interrogatories	xxx	EO	xxx	4/1	NAIC	
	13	Management Discussion & Analysis	xxx	EO	xxx	4/1	Company	
	14	Schedule SIS	1	N/A	N/A	3/1	NAIC	B
	15	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	B
	16	Supplemental Schedule of Business Written By Agency	xxx	N/A	N/A	4/1	NAIC	
		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	Supplemental Electronic Filing	xxx	EO	xxx	4/1	NAIC	
	64	Supplemental .PDF Filing	xxx	EO	xxx	4/1	NAIC	
	65	Quarterly Electronic Filing	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC	
	66	Quarterly .PDF Filing	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC	
	67	June .PDF Filing	xxx	EO	xxx	6/1	NAIC	
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountants Letter of Qualifications	xxx	EO	N/A	6/1	Company	
	82	Audited Financial Reports	xxx	EO	xxx	6/1	Company	
	83	Audited Financial Reports Exemption Affidavit	1	N/A	N/A		Company	B
	84	Communication of Internal Control Related Matters Noted in Audit	xxx	EO	N/A	8/1	Company	B, R
	85	Independent CPA (change)	1	N/A	N/A		Company	B
	86	Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	B, R
	87	Notification of Adverse Financial Condition	1	N/A	N/A		Company	B

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			Domestic		Foreign			
			State	NAIC	State			
	88	Relief from the five-year rotation requirement for lead audit partner	xxx	EO	N/A	3/1	Company	B
	89	Relief from the one-year cooling off period for independent CPA	xxx	EO	N/A	3/1	Company	B
	90	Relief from the Requirements for Audit Committees	xxx	EO	N/A	3/1	Company	B
	91	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	xxx	N/A	N/A		Company	B
		V. STATE REQUIRED FILINGS						
	101	Certificate of Disclosure Form E-178	EO	0	EO	3/1	State	O
	102	Form B, C, and F Insurance Holding Company System Registration Statement ****	1	0	N/A	3/31 Domestic	State	B, Q
	103	Annual Tax and Fees Report and Payment Form E-TAX	EO	0	EO	Filing Fees 3/1 Premium Tax 4/15 or 11/15 with a filed extension	State	D
	104	ORSA *****	1	0	N/A	6/30	Company	B, P
	105	Corporate Governance Annual Disclosure ***	1	0	N/A	6/1	Company	B
	106	Audited Financial Report Internal Control Filings Transmittal Form E-AFR.IC	1	0	N/A	8/1	State	B, R
	107	Group Capital Calculation (File with lead state only)	1	0	N/A		Company	B

*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 the 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

TITLE COMPANIES

NOTES AND INSTRUCTIONS (A-N APPLY TO ALL FILINGS)	
A	<p>Required Filings Contact Person:</p> <p>Tony McCormack Insurance Analyst Phone: (602) 364-3245 E-mail address: tony.mccormack@difi.az.gov</p>
B	<p>Electronic Filing Email Address</p> <p>financialfilings@difi.az.gov</p>
C	<p>Mailing Address:</p> <p>Arizona Department of Insurance and Financial Institutions Insurance Financial Affairs Division 100 North 15th Avenue, Suite 261 Phoenix, Arizona 85007-2630</p>
D	<p>Electronic filing information for tax and fee reporting and payment:</p> <p>Retaliatory Tax Due Dates: 4/15 or 11/15 if you file an extension with the Arizona Department of Revenue for your corporate income tax report.</p> <p>Insurers must use the NAIC OPTins system (or an OPTins authorized business partner) to report and pay taxes and fees starting January 1, 2018.</p> <p>Use appropriate form located on our Tax Forms and Instructions web page at https://difi.az.gov/insurance/premium-taxes and the NAIC OPTins System.</p> <p><u>Contact Person:</u> Premium Tax Section (602) 364-2713 E-mail address: taxunit@difi.az.gov</p>
E	<p>Delivery Instructions:</p> <p>All packages must bear U.S. postmark or courier pick-up date. If due date is a weekend or holiday, deadline is next business day.</p>
F	<p>Late Filings:</p> <p>License will be summarily suspended if renewal fee is not paid when due or if financial condition is unknown due to failure to file annual statement.</p> <p>Up to \$25.00 per day – Annual Statement, Annual Fees, Actuarial Opinion, Management Discussion and Analysis or Audited Financial Report. Up to \$25.00 per day – Certificate of Disclosure Form E-178. Up to \$100.00 per day – Quarterly Statements. We use the NAIC filing date or the USPS postmark or courier pick-up date as the date filed.</p>
G	<p>Original Signatures:</p> <p>Follow the NAIC Annual Statement Instructions.</p>
H	<p>Signature/Notarization/Certification:</p> <p>Follow the NAIC Annual Statement Instructions.</p>
I	<p>Amended Filings:</p> <p>Must be filed within 10 days with explanation. Signature requirements apply.</p>
J	<p>Exceptions from normal filings:</p> <p>EXEMPTIONS: Annual Statement filing exemption – NONE. Audited Financial Report exemptions use NAIC Annual Statement Instructions. Must be filed at least 10 days prior to due date. Form F waiver must be filed no later than March 31. Form E-DIRCOMWAIVER.</p> <p>EXTENSIONS: Approved for a catastrophic event only.</p> <p>FOREIGN: Must provide a copy of an exemption/extension letter from your state of domicile.</p>

TITLE COMPANIES

K	Bar Codes (State or NAIC)	Follow the NAIC Annual Statement Instructions.
L	Signed Jurat	Follow the NAIC Annual Statement Instructions. Domestic insurers must email a copy of the executed Jurat page to financialfilings@difi.az.gov if it was not submitted to the NAIC.
M	NONE Filings:	Every page of the annual statement must be included in sequential page number order. All State forms must be completed or stamped " None " if there are no entries on the form, and returned as instructed.
N	Filings new, discontinued, or modified materially since last year:	Insurers must use the NAIC OPTins system (or an OPTins authorized business partner) to report and pay taxes and fees starting January 1, 2018. Form E-176, Form E-478/E-WCA, Form E-AFR, and Form E-MDA have been discontinued.
O	Certificate of Disclosure Form E-178	Name the document using this format "E178-NAIC Number-Insurer Name" (e.g. E178-55555-INSURERNAME). E-mail completed form to financialfilings@difi.az.gov . <u>Incomplete certificates will not be accepted</u> and may result in statutory penalty of \$25 per day.
P	ORSA	File only if applicable. See Arizona Revised Statutes (ARS) § 20-491 through §20-491.07. Exemptions from this filing requirement are located in ARS 20-491.04.
Q	Form B and C Insurance Holding Company System Registration Statement	ARIZONA DOMESTIC COMPANIES ONLY See Forms E-185, E-185B, E-185C, E-185D, E-185F, and E-185XD, available on our web site at https://difi.az.gov/insurers/licensingregistration/acquisition-holding-company . SEND TO financialfilings@difi.az.gov DO NOT MAIL ORIGINAL / HARD COPY DOCUMENT
R	Communication of Internal Control Related Matters Noted in an Audit <u>must be filed even if NO unremediated material weaknesses were noted</u> . If no unremediated material weaknesses state so in the filing. Management's Report of Internal Controls Over Financial Reporting is not required per Section 17 of the Model Regulation unless annual direct and assumed premiums are \$500 million or more.	Communication of Internal Control Related Matters Noted in an Audit is a letter from the insurer's external auditor. Form E-AFR.IC must be completed and attached to the Management's Report of Internal Controls Over Financial Reporting filed with us.

TITLE COMPANIES

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 filings 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 all 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.