

NAIC BLANKS (E) WORKING GROUP

Blanks Agenda Item Submission Form

CONTACT PERSON: _____ TELEPHONE: _____ EMAIL ADDRESS: _____ ON BEHALF OF: _____ NAME: <u>Steve Kerner</u> TITLE: <u>Assistant Commissioner</u> AFFILIATION: <u>New Jersey Dept. of Banking & Insurance</u> ADDRESS: <u>20 W State St., P.O. Box 325</u> <u>Trenton, NJ 08625-0325</u>	DATE: <u>05/15/2017</u>	FOR NAIC USE ONLY	
	Agenda Item # <u>2017-18BWG MOD</u> Year <u>2018</u> Changes to Existing Reporting <input checked="" type="checkbox"/> [X] New Reporting Requirement <input type="checkbox"/> []		
	REVIEWED FOR ACCOUNTING PRACTICES AND PROCEDURES IMPACT		
	No Impact <input checked="" type="checkbox"/> [X] Modifies Required Disclosure <input type="checkbox"/> []		
	DISPOSITION		

BLANK(S) TO WHICH PROPOSAL APPLIES

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> ANNUAL STATEMENT | <input checked="" type="checkbox"/> QUARTERLY STATEMENT | <input checked="" type="checkbox"/> BLANK |
| <input checked="" type="checkbox"/> INSTRUCTIONS | <input checked="" type="checkbox"/> CROSSCHECKS | |
| <input checked="" type="checkbox"/> Life and Accident & Health | <input checked="" type="checkbox"/> Property/Casualty | <input checked="" type="checkbox"/> Health |
| <input type="checkbox"/> Separate Accounts | <input checked="" type="checkbox"/> Fraternal | <input checked="" type="checkbox"/> Title |
| <input type="checkbox"/> Other Specify | | |

Anticipated Effective Date: 1st Quarter 2018

IDENTIFICATION OF ITEM(S) TO CHANGE

Move the total count of "L" (and "D" for property) status codes provided for Column 1 of Schedule T to footnote and provide in the footnote a count for each status provided in column 1. Add a crosscheck to ensure a status is provided for each jurisdiction on Lines 1 through 57.

REASON, JUSTIFICATION FOR AND/OR BENEFIT OF CHANGE**

The purpose of this proposal is to provide a count of each status provided on Schedule T and add a crosscheck to ensure a status is provided for each jurisdiction on Lines 1 through 57.

NAIC STAFF COMMENTS

Comment on Effective Reporting Date: _____

Other Comments:

** This section must be completed on all forms.

ANNUAL STATEMENT BLANK – LIFE

SCHEDULE T – PREMIUMS AND ANNUITY CONSIDERATIONS
Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only					
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	7 Deposit -Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations				
1. Alabama.....AL							
2. Alaska.....AK							
3. Arizona.....AZ							
4. Arkansas.....AR							
5. California.....CA							
6. Colorado.....CO							
7. Connecticut.....CT							
8. Delaware.....DE							
9. District of Columbia.....DC							
10. Florida.....FL							
11. Georgia.....GA							
12. Hawaii.....HI							
13. Idaho.....ID							
14. Illinois.....IL							
15. Indiana.....IN							
16. Iowa.....IA							
17. Kansas.....KS							
18. Kentucky.....KY							
19. Louisiana.....LA							
20. Maine.....ME							
21. Maryland.....MD							
22. Massachusetts.....MA							
23. Michigan.....MI							
24. Minnesota.....MN							
25. Mississippi.....MS							
26. Missouri.....MO							
27. Montana.....MT							
28. Nebraska.....NE							
29. Nevada.....NV							
30. New Hampshire.....NH							
31. New Jersey.....NJ							
32. New Mexico.....NM							
33. New York.....NY							
34. North Carolina.....NC							
35. North Dakota.....ND							
36. Ohio.....OH							
37. Oklahoma.....OK							
38. Oregon.....OR							
39. Pennsylvania.....PA							
40. Rhode Island.....RI							
41. South Carolina.....SC							
42. South Dakota.....SD							
43. Tennessee.....TN							
44. Texas.....TX							
45. Utah.....UT							
46. Vermont.....VT							
47. Virginia.....VA							
48. Washington.....WA							
49. West Virginia.....WV							
50. Wisconsin.....WI							
51. Wyoming.....WY							
52. American Samoa.....AS							
53. Guam.....GU							
54. Puerto Rico.....PR							
55. US Virgin Islands.....VI							
56. Northern Mariana Islands.....MP							
57. Canada.....CAN							
58. Aggregate Other Alien.....OT	XXX						
59. Subtotal.....	XXX (a)						
90. Reporting entity contributions for employee benefits plans.....	XXX						
91. Dividends or refunds applied to purchase paid-up additions and annuities.....	XXX						
92. Dividends or refunds applied to shorten endowment or premium paying period.....	XXX						
93. Premium or annuity considerations waived under disability or other contract provisions.....	XXX						
94. Aggregate other amounts not allocable by State.....	XXX						
95. Totals (Direct Business).....	XXX						
96. Plus reinsurance assumed.....	XXX						
97. Totals (All Business).....	XXX						
98. Less reinsurance ceded.....	XXX						
99. Totals (All Business) less Reinsurance Ceded.....	XXX			(b)			
DETAILS OF WRITE-INS							
58001.....	XXX						
58002.....	XXX						
58003.....	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page.....	XXX						
58999. Total (Lines 58001 through 58003 + 58998) (Line 58 above).....	XXX						
9401.....	XXX						
9402.....	XXX						
9403.....	XXX						
9498. Summary of remaining write-ins for Line 94 from overflow page.....	XXX						
9499. Total (Lines 9401 through 9403 + 9498) (Line 94 above).....	XXX						

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

Explanation of basis of allocation by states, etc., of premiums and annuity considerations

(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG..... R - Registered - Non-domiciled RRGs.....
E - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state..... Q - Qualified - Qualified or Accredited Reinsurer.....
N - None of the above - Not allowed to write business in the state.....

(a) - Insert the number of L responses except for Canada and Other Alien

(b) - Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Cols. 8, 9 and 10, or with Schedule H, Part 1, Column 1, Line 1 indicate which:

ANNUAL STATEMENT BLANK – HEALTH

SCHEDULE T – PREMIUMS AND OTHER CONSIDERATIONS
Allocated by States and Territories

1 State, Etc.	2 Active Status (a)	Direct Business Only							
		3 Accident & Health Premiums	4 Medicare Title XVIII	5 Medicaid Title XIX	6 Federal Employees Health Benefits Plan Premiums	7 Life & Annuity Premiums & Other Considerations	8 Property/Casualty Premiums	9 Total Columns 2 Through 7	10 Deposit-Type Contracts
1. Alabama.....AL									
2. Alaska.....AK									
3. Arizona.....AZ									
4. Arkansas.....AR									
5. California.....CA									
6. Colorado.....CO									
7. Connecticut.....CT									
8. Delaware.....DE									
9. Dist Columbia.....DC									
10. Florida.....FL									
11. Georgia.....GA									
12. Hawaii.....HI									
13. Idaho.....ID									
14. Illinois.....IL									
15. Indiana.....IN									
16. Iowa.....IA									
17. Kansas.....KS									
18. Kentucky.....KY									
19. Louisiana.....LA									
20. Maine.....ME									
21. Maryland.....MD									
22. Massachusetts.....MA									
23. Michigan.....MI									
24. Minnesota.....MN									
25. Mississippi.....MS									
26. Missouri.....MO									
27. Montana.....MT									
28. Nebraska.....NE									
29. Nevada.....NV									
30. New Hampshire.....NH									
31. New Jersey.....NJ									
32. New Mexico.....NM									
33. New York.....NY									
34. North Carolina.....NC									
35. North Dakota.....ND									
36. Ohio.....OH									
37. Oklahoma.....OK									
38. Oregon.....OR									
39. Pennsylvania.....PA									
40. Rhode Island.....RI									
41. South Carolina.....SC									
42. South Dakota.....SD									
43. Tennessee.....TN									
44. Texas.....TX									
45. Utah.....UT									
46. Vermont.....VT									
47. Virginia.....VA									
48. Washington.....WA									
49. West Virginia.....WV									
50. Wisconsin.....WI									
51. Wyoming.....WY									
52. American Samoa.....AS									
53. Guam.....GU									
54. Puerto Rico.....PR									
55. U.S. Virgin Islands.....VI									
56. Northern Mariana Islands.....MP									
57. Canada.....CAN									
58. Aggregate other alien.....OT	XXX								
59. Subtotal.....	XXX								
60. Reporting entity contributions for Employee Benefit Plans.....	XXX								
61. Total (Direct Business)	(a) XXX								
DETAILS OF WRITE-INS									
58001.....	XXX								
58002.....	XXX								
58003.....	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page....	XXX								
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX								
(L)-Licensed or Chartered – Licensed Insurance Carrier or Domiciled RRG; (R) Registered – Non-domiciled RRGs; (Q)-Qualified – Qualified or Accredited Reinsurer; (E) Eligible – Reporting Entities eligible or approved to write Surplus Lines in the state; (N)-None of the above – Not allowed to write business in the state. Explanation of basis of allocation by states, premiums by state, etc.									

(a) Insert the number of L responses except for Canada and other Alien.

(a) Active Status Counts:

L – Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG R – Registered - Non-domiciled RRGs.....
 E – Eligible – Reporting Entities eligible or approved to write Surplus Lines in the state..... Q – Qualified - Qualified or Accredited Reinsurer.....
 N – None of the above - Not allowed to write business in the state.....

ANNUAL STATEMENT BLANK – PROPERTY

**SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN
Allocated By States And Territories**

States, Etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premium Written for Federal Purchasing Groups (Included in Col. 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama.....AL									
2. Alaska.....AK									
3. Arizona.....AZ									
4. Arkansas.....AR									
5. California.....CA									
6. Colorado.....CO									
7. Connecticut.....CT									
8. Delaware.....DE									
9. Dist. Columbia.....DC									
10. Florida.....FL									
11. Georgia.....GA									
12. Hawaii.....HI									
13. Idaho.....ID									
14. Illinois.....IL									
15. Indiana.....IN									
16. Iowa.....IA									
17. Kansas.....KS									
18. Kentucky.....KY									
19. Louisiana.....LA									
20. Maine.....ME									
21. Maryland.....MD									
22. Massachusetts.....MA									
23. Michigan.....MI									
24. Minnesota.....MN									
25. Mississippi.....MS									
26. Missouri.....MO									
27. Montana.....MT									
28. Nebraska.....NE									
29. Nevada.....NV									
30. New Hampshire.....NH									
31. New Jersey.....NJ									
32. New Mexico.....NM									
33. New York.....NY									
34. No. Carolina.....NC									
35. No. Dakota.....ND									
36. Ohio.....OH									
37. Oklahoma.....OK									
38. Oregon.....OR									
39. Pennsylvania.....PA									
40. Rhode Island.....RI									
41. So. Carolina.....SC									
42. So. Dakota.....SD									
43. Tennessee.....TN									
44. Texas.....TX									
45. Utah.....UT									
46. Vermont.....VT									
47. Virginia.....VA									
48. Washington.....WA									
49. West Virginia.....WV									
50. Wisconsin.....WI									
51. Wyoming.....WY									
52. American Samoa.....AS									
53. Guam.....GU									
54. Puerto Rico.....PR									
55. U.S. Virgin Islands.....VI									
56. Northern Mariana Islands.....MP									
57. Canada.....CAN									
58. Aggregate other alien.....OT	XXX								
59. Totals	(a) XXX								
DETAILS OF WRITE-INS									
\$8001.	XXX								
\$8002.	XXX								
\$8003.	XXX								
\$8998. Sum. of remaining write-ins for Line 58 from overflow page.....	XXX								
\$8999. Totals (Lines 58001 through 58003+58998) (Line 58 above)	XXX								
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile - see DSLI); (D) DSLI - Domestic Surplus Lines Insurer (DSLI) - Reporting entities to write Surplus Lines in the state of domicile; (N) None of the above - Not allowed to write business in the state. Explanation of basis of allocation of premiums by states, etc.									

(a) — Insert the number of D and L responses except for Canada and Other Alien
(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG.....	R - Registered - Non-domiciled RRGs.....
E - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile - see DSLI).....	Q - Qualified - Qualified or Accredited Reinsurer.....
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write Surplus Lines in the state of domicile.....	N - None of the above - Not allowed to write business in the state.....

ANNUAL STATEMENT BLANK – FRATERNAL

SCHEDULE T – PREMIUMS AND ANNUITY CONSIDERATIONS
Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only					
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	7 Deposit-Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations				
1. Alabama.....AL							
2. Alaska.....AK							
3. Arizona.....AZ							
4. Arkansas.....AR							
5. California.....CA							
6. Colorado.....CO							
7. Connecticut.....CT							
8. Delaware.....DE							
9. District of Columbia.....DC							
10. Florida.....FL							
11. Georgia.....GA							
12. Hawaii.....HI							
13. Idaho.....ID							
14. Illinois.....IL							
15. Indiana.....IN							
16. Iowa.....IA							
17. Kansas.....KS							
18. Kentucky.....KY							
19. Louisiana.....LA							
20. Maine.....ME							
21. Maryland.....MD							
22. Massachusetts.....MA							
23. Michigan.....MI							
24. Minnesota.....MN							
25. Mississippi.....MS							
26. Missouri.....MO							
27. Montana.....MT							
28. Nebraska.....NE							
29. Nevada.....NV							
30. New Hampshire.....NH							
31. New Jersey.....NJ							
32. New Mexico.....NM							
33. New York.....NY							
34. North Carolina.....NC							
35. North Dakota.....ND							
36. Ohio.....OH							
37. Oklahoma.....OK							
38. Oregon.....OR							
39. Pennsylvania.....PA							
40. Rhode Island.....RI							
41. South Carolina.....SC							
42. South Dakota.....SD							
43. Tennessee.....TN							
44. Texas.....TX							
45. Utah.....UT							
46. Vermont.....VT							
47. Virginia.....VA							
48. Washington.....WA							
49. West Virginia.....WV							
50. Wisconsin.....WI							
51. Wyoming.....WY							
52. American Samoa.....AS							
53. Guam.....GU							
54. Puerto Rico.....PR							
55. US Virgin Islands.....VI							
56. Northern Mariana Islands.....MP							
57. Canada.....CAN							
58. Aggregate Other Alien.....OT	XXX						
59. Subtotal.....(e) XXX							
90. Reporting entity contributions for employee benefits plans.....	XXX						
91. Dividends or refunds applied to purchase paid-up additions and annuities.....	XXX						
92. Dividends or refunds applied to shorten endowment or premium paying period.....	XXX						
93. Premium or annuity considerations waived under disability or other contract provisions.....	XXX						
94. Aggregate other amounts not allocable by State.....	XXX						
95. Totals (Direct Business).....	XXX						
96. Plus reinsurance assumed.....	XXX						
97. Totals (All Business).....	XXX						
98. Less reinsurance ceded.....	XXX						
99. Totals (All Business) less Reinsurance Ceded.....	XXX			(b)			
DETAILS OF WRITE-INS							
58001.....	XXX						
58002.....	XXX						
58003.....	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page.....							
58999. Total (Lines 58001 through 58003 + 58998) (Line 58 above).....	XXX						
9401.....	XXX						
9402.....	XXX						
9403.....	XXX						
9498. Summary of remaining write-ins for Line 94 from overflow page.....	XXX						
9499. Total (Lines 9401 through 9403 + 9498) (Line 94 above).....	XXX						

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

Explanation of basis of allocation by states, etc., of premiums and annuity considerations

(e) Insert the number of L responses except for Canada and Other Alien.
 (a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG
 E - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state
 N - None of the above - Not allowed to write business in the state
 R - Registered - Non-domiciled RRGs
 Q - Qualified - Qualified or Accredited Reinsurer

(b) Column 4 should balance with Exhibit I, Lines 6.4, 10.4 and 16.4, Col. 4 or with Schedule H, Part I, Column 1, Line 1 indicate which: _____.

ANNUAL STATEMENT BLANK – TITLE

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN
By States and Territories

States, Etc.	1 Active Status (a)	2 Premium Rate (b)	Direct Premiums Written			6 Other Income	7 Net Premiums Earned	8 Direct Losses and Allocated Loss Adjustment Expenses Paid	9 Direct Losses and Allocated Loss Adjustment Expenses Incurred	10 Direct Known Claim Reserve
			3 Direct Operations	4 Agency Operations						
				4 Non-affiliated Agencies	5 Affiliated Agencies					
1. Alabama.....AL										
2. Alaska.....AK										
3. Arizona.....AZ										
4. Arkansas.....AR										
5. California.....CA										
6. Colorado.....CO										
7. Connecticut.....CT										
8. Delaware.....DE										
9. Dist. Columbia.....DC										
10. Florida.....FL										
11. Georgia.....GA										
12. Hawaii.....HI										
13. Idaho.....ID										
14. Illinois.....IL										
15. Indiana.....IN										
16. Iowa.....IA										
17. Kansas.....KS										
18. Kentucky.....KY										
19. Louisiana.....LA										
20. Maine.....ME										
21. Maryland.....MD										
22. Massachusetts.....MA										
23. Michigan.....MI										
24. Minnesota.....MN										
25. Mississippi.....MS										
26. Missouri.....MO										
27. Montana.....MT										
28. Nebraska.....NE										
29. Nevada.....NV										
30. New Hampshire.....NH										
31. New Jersey.....NJ										
32. New Mexico.....NM										
33. New York.....NY										
34. No. Carolina.....NC										
35. No. Dakota.....ND										
36. Ohio.....OH										
37. Oklahoma.....OK										
38. Oregon.....OR										
39. Pennsylvania.....PA										
40. Rhode Island.....RI										
41. So. Carolina.....SC										
42. So. Dakota.....SD										
43. Tennessee.....TN										
44. Texas.....TX										
45. Utah.....UT										
46. Vermont.....VT										
47. Virginia.....VA										
48. Washington.....WA										
49. West Virginia.....WV										
50. Wisconsin.....WI										
51. Wyoming.....WY										
52. American Samoa.....AS										
53. Guam.....GU										
54. Puerto Rico.....PR										
55. U.S. Virgin Islands.....VI										
56. Northern Mariana Islands.....MP										
57. Canada.....CAN										
58. Aggregate										
59. Other Alien.....OT	xxx	xxx								
Totals	(a) XXX	xxx								
DETAILS OF WRITE-INS										
8001.....	xxx									
8002.....	xxx									
8003.....	xxx									
8998 Summary of remaining write-ins for Line 58 from overflow page.....	xxx									
8999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	xxx									

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG
 E - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state
 N - None of the above - Not allowed to write business in the state
 R - Registered - Non-domiciled RRGs
 Q - Qualified - Qualified or Accredited Reinsurer

(b) Each type of rate must be coded with a combination of the five Activity Codes (R, S, X, C, and/or E) listed in the instructions. Use the code combination corresponding to the State's statutory definitions of title insurance premium. If more than one combination of activities is indicated in the statutory definition, all relevant combinations must be listed. See the Schedule T Instructions.

ANNUAL STATEMENT INSTRUCTIONS – LIFE

SCHEDULE T – PREMIUMS AND ANNUITY CONSIDERATIONS

ALLOCATED BY STATES AND TERRITORIES



Detail Eliminated To Conserve Space

Details of Write-ins Aggregated on Line 94 for Other Amounts Not Allocable By State

List separately items which have been credited to the premium account that are properly not allocable to a specific state or states, and which do not fit the descriptions on Lines 90 to 93. Descriptions must be sufficient to clearly disclose the nature of the items listed. Descriptions such as “Miscellaneous” are not permitted.

Include summary of remaining write-ins for Line 94 from the Overflow page on the separate line indicated.

Explanation of basis of allocation by states, etc., of premiums and annuity considerations

Provide a detailed explanation of the by-state and by-territory allocation of premium and other considerations used by the reporting entity. The explanation should be detailed enough to determine compliance with state laws and regulations.

Footnote (a):

Provide the total of each active status code in Column 1. The sum of all the counts ~~total~~ of all active status codes should equal 57.



Detail Eliminated To Conserve Space

ANNUAL STATEMENT INSTRUCTIONS – HEALTH

SCHEDULE T – PREMIUMS AND OTHER CONSIDERATIONS

ALLOCATED BY STATES AND TERRITORIES



Detail Eliminated To Conserve Space

Details of Write-ins Aggregated at Line 58 for Other Alien

List separately each alien jurisdiction for which there is no pre-printed line on Schedule T.

If the premium from an alien jurisdiction is due to relocation of current policyholders, the amount may be aggregated and reported as “Other Alien.” Premiums from jurisdictions in which there is active writing must be reported by jurisdiction and include premium from relocated policyholders residing in the respective jurisdiction.

Identify each alien jurisdiction by using a **three-character (ISO Alpha 3) country code followed by the name of the country (e.g., DEU Germany)**. For premium that can be aggregated and reported as “Other Alien” as stated in the previous paragraph, use “ZZZ” for the country code and “Other Alien” for the country name. A comprehensive listing of country codes is available in the appendix of these instructions.

Include summary of remaining write-ins for Line 58 from the Overflow page on the separate line indicated.

Explanation of basis of allocation by states, premiums by states, etc.

Provide a detailed explanation of the by-state and by-territory allocation of premium and other considerations used by the reporting entity. The explanation should be detailed enough to determine compliance with state laws and regulations.

Footnote (a):

Provide the total of each active status code in Column 1. The ~~sum of all the counts total~~ of all active status codes should equal 57.



Detail Eliminated To Conserve Space

ANNUAL STATEMENT INSTRUCTIONS – PROPERTY

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN

ALLOCATED BY STATES AND TERRITORIES



Detail Eliminated To Conserve Space

Details of Write-ins Aggregated at Line 58 for Other Alien

List separately each alien jurisdiction for which there is no pre-printed line on Schedule T.

If the premium from an alien jurisdiction is due to relocation of current policyholders, the amount may be aggregated and reported as “Other Alien.” Premiums from jurisdictions in which there is active writing must be reported by jurisdiction and include premium from relocated policyholders residing in the respective jurisdiction.

Identify each alien jurisdiction by using a **three-character (ISO Alpha 3) country code followed by the name of the country (e.g., DEU Germany)**. For premium that can be aggregated and reported as “Other Alien” as stated in the previous paragraph, use “ZZZ” for the country code and “Other Alien” for the country name. A comprehensive listing of country codes is available in the appendix of these instructions.

Include summary of remaining write-ins for Line 58 from the Overflow page on the separate line indicated.

Explanation of basis of allocation of premiums by states, etc

Provide a detailed explanation of the by-state and territory allocation of premium and other considerations used by the reporting entity. The explanation should be detailed enough to determine compliance with state laws and regulations.

Footnote (a):

Provide the total of each active status code in Column 1. The ~~sum of all the counts total~~ of all active status codes should equal 57.



Detail Eliminated To Conserve Space

ANNUAL STATEMENT INSTRUCTIONS – FRATERNAL

SCHEDULE T – PREMIUMS AND ANNUITY CONSIDERATIONS

ALLOCATED BY STATES AND TERRITORIES



Detail Eliminated To Conserve Space

Details of Write-ins Aggregated on Line 94 for Other Amounts Not Allocable By State

List separately items that have been credited to the premium account which are properly not allocable to a specific state or states, and which do not fit the descriptions on Lines 90 to 93. Descriptions must be sufficient to clearly disclose the nature of the items listed. Descriptions such as “Miscellaneous” are not permitted.

Include summary of remaining write-ins for Line 94 from the Overflow page on the separate line indicated.

Explanation of basis of allocation by states, etc., of premiums and annuity considerations

Provide a detailed explanation of the by-state and by-territory allocation of premium and other considerations used by the reporting entity. The explanation should be detailed enough to determine compliance with state laws and regulations.

Footnote (a):

Provide the total of each active status code in Column 1. The sum of all the counts ~~total~~ of all active status codes should equal 57.



Detail Eliminated To Conserve Space

ANNUAL STATEMENT INSTRUCTIONS – TITLE

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN

BY STATES AND TERRITORIES



Detail Eliminated To Conserve Space

Details of Write-ins Aggregated at Line 58 For Other Alien

List separately each alien jurisdiction for which there is no pre-printed line on Schedule T.

If the premium from an alien jurisdiction is due to relocation of current policyholders, the amount may be aggregated and reported as “Other Alien.” Premiums from jurisdictions in which there is active writing must be reported by jurisdiction and include premium from relocated policyholders residing in the respective jurisdiction.

Identify each alien jurisdiction by using a **three-character (ISO Alpha 3) country code followed by the name of the country (e.g., DEU Germany)**. For premium that can be aggregated and reported as “Other Alien” as stated in the previous paragraph, use “ZZZ” for the country code and “Other Alien” for the country name. A comprehensive listing of country codes is available in the appendix of these instructions.

Include summary of remaining write-ins for Line 58 from the Overflow page on the separate line indicated.

Footnote (a):

Provide the total of each active status code in Column 1. The ~~sum of all the counts total~~ of all active status codes should equal 57.



Detail Eliminated To Conserve Space

QUARTERLY STATEMENT BLANK – LIFE

SCHEDULE T – PREMIUMS AND ANNUITY CONSIDERATIONS
Current Year To Date - Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only					
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	7 Deposit -Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations				
1. Alabama.....AL							
2. Alaska.....AK							
3. Arizona.....AZ							
4. Arkansas.....AR							
5. California.....CA							
6. Colorado.....CO							
7. Connecticut.....CT							
8. Delaware.....DE							
9. District of Columbia.....DC							
10. Florida.....FL							
11. Georgia.....GA							
12. Hawaii.....HI							
13. Idaho.....ID							
14. Illinois.....IL							
15. Indiana.....IN							
16. Iowa.....IA							
17. Kansas.....KS							
18. Kentucky.....KY							
19. Louisiana.....LA							
20. Maine.....ME							
21. Maryland.....MD							
22. Massachusetts.....MA							
23. Michigan.....MI							
24. Minnesota.....MN							
25. Mississippi.....MS							
26. Missouri.....MO							
27. Montana.....MT							
28. Nebraska.....NE							
29. Nevada.....NV							
30. New Hampshire.....NH							
31. New Jersey.....NJ							
32. New Mexico.....NM							
33. New York.....NY							
34. North Carolina.....NC							
35. North Dakota.....ND							
36. Ohio.....OH							
37. Oklahoma.....OK							
38. Oregon.....OR							
39. Pennsylvania.....PA							
40. Rhode Island.....RI							
41. South Carolina.....SC							
42. South Dakota.....SD							
43. Tennessee.....TN							
44. Texas.....TX							
45. Utah.....UT							
46. Vermont.....VT							
47. Virginia.....VA							
48. Washington.....WA							
49. West Virginia.....WV							
50. Wisconsin.....WI							
51. Wyoming.....WY							
52. American Samoa.....AS							
53. Guam.....GU							
54. Puerto Rico.....PR							
55. US Virgin Islands.....VI							
56. Northern Mariana Islands.....MP							
57. Canada.....CAN							
58. Aggregate Other Alien.....OT	XXX						
59. Subtotal.....	XXX(a)						
90. Reporting entity contributions for employee benefits plans.....	XXX						
91. Dividends or refunds applied to purchase paid-up additions and annuities.....	XXX						
92. Dividends or refunds applied to shorten endowment or premium paying period.....	XXX						
93. Premium or annuity considerations waived under disability or other contract provisions.....	XXX						
94. Aggregate other amounts not allocable by State.....	XXX						
95. Totals (Direct Business).....	XXX						
96. Plus reinsurance assumed.....	XXX						
97. Totals (All Business).....	XXX						
98. Less reinsurance ceded.....	XXX			(b)			
99. Totals (All Business) less Reinsurance Ceded.....	XXX						
DETAILS OF WRITE-INS							
58001.....	XXX						
58002.....	XXX						
58003.....	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page.....	XXX						
58999. Total (Lines 58001 through 58003 + 58998) (Line 58 above).....	XXX						
9401.....	XXX						
9402.....	XXX						
9403.....	XXX						
9498. Summary of remaining write-ins for Line 94 from overflow page.....	XXX						
9499. Total (Lines 9401 through 9403 + 9498) (Line 94 above).....	XXX						

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) - Insert the number of L responses except for Canada and Other Alien.
 (a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG.....
 E - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state.....
 N - None of the above - Not allowed to write business in the state.....

QUARTERLY STATEMENT BLANK – HEALTH

SCHEDULE T – PREMIUMS AND OTHER CONSIDERATIONS
Current Year to Date – Allocated by States and Territories

1 State, Etc.	2 Active Status (a)	Direct Business Only								
		3 Accident & Health Premiums	4 Medicare Title XVIII	5 Medicaid Title XIX	6 Federal Employees Health Benefits Plan Premiums	7 Life & Annuity Premiums & Other Considerations	8 Property/Casualty Premiums	9 Total Columns 2 Through 7	10 Deposit-Type Contracts	
1. Alabama.....AL	
2. Alaska.....AK	
3. Arizona.....AZ	
4. Arkansas.....AR	
5. California.....CA	
6. Colorado.....CO	
7. Connecticut.....CT	
8. Delaware.....DE	
9. Dist Columbia.....DC	
10. Florida.....FL	
11. Georgia.....GA	
12. Hawaii.....HI	
13. Idaho.....ID	
14. Illinois.....IL	
15. Indiana.....IN	
16. Iowa.....IA	
17. Kansas.....KS	
18. Kentucky.....KY	
19. Louisiana.....LA	
20. Maine.....ME	
21. Maryland.....MD	
22. Massachusetts.....MA	
23. Michigan.....MI	
24. Minnesota.....MN	
25. Mississippi.....MS	
26. Missouri.....MO	
27. Montana.....MT	
28. Nebraska.....NE	
29. Nevada.....NV	
30. New Hampshire.....NH	
31. New Jersey.....NJ	
32. New Mexico.....NM	
33. New York.....NY	
34. North Carolina.....NC	
35. North Dakota.....ND	
36. Ohio.....OH	
37. Oklahoma.....OK	
38. Oregon.....OR	
39. Pennsylvania.....PA	
40. Rhode Island.....RI	
41. South Carolina.....SC	
42. South Dakota.....SD	
43. Tennessee.....TN	
44. Texas.....TX	
45. Utah.....UT	
46. Vermont.....VT	
47. Virginia.....VA	
48. Washington.....WA	
49. West Virginia.....WV	
50. Wisconsin.....WI	
51. Wyoming.....WY	
52. American Samoa.....AS	
53. Guam.....GU	
54. Puerto Rico.....PR	
55. U.S. Virgin Islands.....VI	
56. Northern Mariana Islands.....MP	
57. Canada.....CAN	
58. Aggregate other alien.....OT	XXX	.....	.....	.....	.....	.....	.....	.....	.....
59. Subtotal.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....
60. Reporting entity contributions for Employee Benefit Plans.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....
61. Total (Direct Business).....	XXX(a)	.....	.....	.....	.....	.....	.....	.....	.....
DETAILS OF WRITE-INS										
58001.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....
58002.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....
58003.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....
58998. Summary of remaining write-ins for Line 58 from overflow page.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above).....	XXX	.....	.....	.....	.....	.....	.....	.....	.....

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRG; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) - Insert the number of L responses except for Canada and other Alien.
 (a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG..... R - Registered - Non-domiciled RRG.....
 E - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state..... Q - Qualified - Qualified or Accredited Reinsurer.....
 N - None of the above - Not allowed to write business in the state.....

QUARTERLY STATEMENT BLANK – PROPERTY

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN
Current Year to Date – Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama.....AL
2. Alaska.....AK
3. Arizona.....AZ
4. Arkansas.....AR
5. California.....CA
6. Colorado.....CO
7. Connecticut.....CT
8. Delaware.....DE
9. Dist. Columbia.....DC
10. Florida.....FL
11. Georgia.....GA
12. Hawaii.....HI
13. Idaho.....ID
14. Illinois.....IL
15. Indiana.....IN
16. Iowa.....IA
17. Kansas.....KS
18. Kentucky.....KY
19. Louisiana.....LA
20. Maine.....ME
21. Maryland.....MD
22. Massachusetts.....MA
23. Michigan.....MI
24. Minnesota.....MN
25. Mississippi.....MS
26. Missouri.....MO
27. Montana.....MT
28. Nebraska.....NE
29. Nevada.....NV
30. New Hampshire.....NH
31. New Jersey.....NJ
32. New Mexico.....NM
33. New York.....NY
34. No. Carolina.....NC
35. No. Dakota.....ND
36. Ohio.....OH
37. Oklahoma.....OK
38. Oregon.....OR
39. Pennsylvania.....PA
40. Rhode Island.....RI
41. So. Carolina.....SC
42. So. Dakota.....SD
43. Tennessee.....TN
44. Texas.....TX
45. Utah.....UT
46. Vermont.....VT
47. Virginia.....VA
48. Washington.....WA
49. West Virginia.....WV
50. Wisconsin.....WI
51. Wyoming.....WY
52. American Samoa.....AS
53. Guam.....GU
54. Puerto Rico.....PR
55. U.S. Virgin Islands.....VI
56. Northern Mariana Islands.....MP
57. Canada.....CAN
58. Aggregate Other Alien.....OT
59. Totals	XXX	.....	.....	.....	.....	.....	.....
DETAILS OF WRITE-INS							
58001.	XXX	.....	.....	.....	.....	.....	.....
58002.	XXX	.....	.....	.....	.....	.....	.....
58003.	XXX	.....	.....	.....	.....	.....	.....
58998. Summary of remaining write-ins for Line 58 from overflow page.....	XXX	.....	.....	.....	.....	.....	.....
58999. TOTALS (Lines 58001 through 58003 plus 58998) Line 58 above)	XXX	.....	.....	.....	.....	.....	.....

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile - see DSLI); (D) DSLI - Domestic Surplus Lines Insurer (DSLI) - Reporting entities to write Surplus Lines in the state of domicile; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of D and L responses except for Canada and Other Alien.

(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG.....	R - Registered - Non-domiciled RRGs.....
E - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile - see DSLI).....	Q - Qualified - Qualified or Accredited Reinsurer.....
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write Surplus Lines in the state of domicile.....	N - None of the above - Not allowed to write business in the state.....

QUARTERLY STATEMENT BLANK – FRATERNAL

SCHEDULE T – PREMIUMS AND ANNUITY CONSIDERATIONS
Current Year to Date – Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only					
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	7 Deposit-Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations				
1. Alabama.....AL							
2. Alaska.....AK							
3. Arizona.....AZ							
4. Arkansas.....AR							
5. California.....CA							
6. Colorado.....CO							
7. Connecticut.....CT							
8. Delaware.....DE							
9. District of Columbia.....DC							
10. Florida.....FL							
11. Georgia.....GA							
12. Hawaii.....HI							
13. Idaho.....ID							
14. Illinois.....IL							
15. Indiana.....IN							
16. Iowa.....IA							
17. Kansas.....KS							
18. Kentucky.....KY							
19. Louisiana.....LA							
20. Maine.....ME							
21. Maryland.....MD							
22. Massachusetts.....MA							
23. Michigan.....MI							
24. Minnesota.....MN							
25. Mississippi.....MS							
26. Missouri.....MO							
27. Montana.....MT							
28. Nebraska.....NE							
29. Nevada.....NV							
30. New Hampshire.....NH							
31. New Jersey.....NJ							
32. New Mexico.....NM							
33. New York.....NY							
34. North Carolina.....NC							
35. North Dakota.....ND							
36. Ohio.....OH							
37. Oklahoma.....OK							
38. Oregon.....OR							
39. Pennsylvania.....PA							
40. Rhode Island.....RI							
41. South Carolina.....SC							
42. South Dakota.....SD							
43. Tennessee.....TN							
44. Texas.....TX							
45. Utah.....UT							
46. Vermont.....VT							
47. Virginia.....VA							
48. Washington.....WA							
49. West Virginia.....WV							
50. Wisconsin.....WI							
51. Wyoming.....WY							
52. American Samoa.....AS							
53. Guam.....GU							
54. Puerto Rico.....PR							
55. US Virgin Islands.....VI							
56. Northern Mariana Islands.....MP							
57. Canada.....CAN							
58. Aggregate Other Alien.....OT	XXX						
59. Subtotal.....	XXX(a)						
90. Reporting entity contributions for employee benefits plans.....	XXX						
91. Dividends or refunds applied to purchase paid-up additions and annuities.....	XXX						
92. Dividends or refunds applied to shorten endowment or premium paying period.....	XXX						
93. Premium or annuity considerations waived under disability or other contract provisions.....	XXX						
94. Aggregate other amounts not allocable by State.....	XXX						
95. Totals (Direct Business).....	XXX						
96. Plus reinsurance assumed.....	XXX						
97. Totals (All Business).....	XXX						
98. Less reinsurance ceded.....	XXX						
99. Totals (All Business) less Reinsurance Ceded.....	XXX			(b)			
DETAILS OF WRITE-INS							
58001.....	XXX						
58002.....	XXX						
58003.....	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page.....	XXX						
58999. Total (Lines 58001 through 58003 + 58998) (Line 58 above).....	XXX						
9401.....	XXX						
9402.....	XXX						
9403.....	XXX						
9498. Summary of remaining write-ins for Line 94 from overflow page.....	XXX						
9499. Total (Lines 9401 through 9403 + 9498) (Line 94 above).....	XXX						

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) - Insert the number of L responses except for Canada and Other Alien.

(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG..... R - Registered - Non-domiciled RRGs.....
 E - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state..... Q - Qualified - Qualified or Accredited Reinsurer.....
 N - None of the above - Not allowed to write business in the state.....

QUARTERLY STATEMENT BLANK – TITLE

**SCHEDULE T—EXHIBIT OF PREMIUMS WRITTEN
Current Year to Date – By States and Territories**

States, etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Known Claim Reserve	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama.....AL							
2. Alaska.....AK							
3. Arizona.....AZ							
4. Arkansas.....AR							
5. California.....CA							
6. Colorado.....CO							
7. Connecticut.....CT							
8. Delaware.....DE							
9. Dist. Columbia.....DC							
10. Florida.....FL							
11. Georgia.....GA							
12. Hawaii.....HI							
13. Idaho.....ID							
14. Illinois.....IL							
15. Indiana.....IN							
16. Iowa.....IA							
17. Kansas.....KS							
18. Kentucky.....KY							
19. Louisiana.....LA							
20. Maine.....ME							
21. Maryland.....MD							
22. Massachusetts.....MA							
23. Michigan.....MI							
24. Minnesota.....MN							
25. Mississippi.....MS							
26. Missouri.....MO							
27. Montana.....MT							
28. Nebraska.....NE							
29. Nevada.....NV							
30. New Hampshire.....NH							
31. New Jersey.....NJ							
32. New Mexico.....NM							
33. New York.....NY							
34. No. Carolina.....NC							
35. No. Dakota.....ND							
36. Ohio.....OH							
37. Oklahoma.....OK							
38. Oregon.....OR							
39. Pennsylvania.....PA							
40. Rhode Island.....RI							
41. So. Carolina.....SC							
42. So. Dakota.....SD							
43. Tennessee.....TN							
44. Texas.....TX							
45. Utah.....UT							
46. Vermont.....VT							
47. Virginia.....VA							
48. Washington.....WA							
49. West Virginia.....WV							
50. Wisconsin.....WI							
51. Wyoming.....WY							
52. American Samoa.....AS							
53. Guam.....GU							
54. Puerto Rico.....PR							
55. U.S. Virgin Is.....VI							
56. Northern Mariana Islands.....MP							
57. Canada.....CAN							
58. Aggregate Other Alien.....OT	XXX						
59. Totals	XXX(a)						
DETAILS OF WRITE-INS							
58001.	XXX						
58002.	XXX						
58003.	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page.....	XXX						
58999. TOTALS (Lines 58001 through 58003 plus 58998) Line 58 above	XXX						

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRG; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG
 E - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state
 N - None of the above - Not allowed to write business in the state
 R - Registered - Non-domiciled RRGs
 Q - Qualified - Qualified or Accredited Reinsurer

QUARTERLY STATEMENT INSTRUCTIONS – LIFE

SCHEDULE T – PREMIUMS AND ANNUITY CONSIDERATIONS

CURRENT YEAR TO DATE – ALLOCATED BY STATES AND TERRITORIES



Detail Eliminated To Conserve Space

Details of Write-ins Aggregated on Line 58 for Other Alien

List separately each alien jurisdiction for which there is no pre-printed line on Schedule T.

If the premium from an alien jurisdiction is due to relocation of current policyholders, the amount may be aggregated and reported as “Other Alien.” Premiums from jurisdictions in which there is active writing must be reported by jurisdiction and include premium from relocated policyholders residing in the respective jurisdiction.

Identify each alien jurisdiction by using a **three-character (ISO Alpha 3) country code followed by the name of the country (e.g., DEU Germany)**. For premium that can be aggregated and reported as “Other Alien” as stated in the previous paragraph, use “ZZZ” for the country code and “Other Alien” for the country name. A comprehensive listing of country codes is available in the appendix of the annual statement instructions.

Include summary of remaining write-ins for Line 58 from the Overflow page on the separate line indicated.

Details of Write-ins Aggregated on Line 94 for Other Amounts Not Allocable By State

List separately items which have been credited to the premium account that are properly not allocable to a specific state or states, and which do not fit the descriptions on Lines 90 to 93. Descriptions must be sufficient to clearly disclose the nature of the items listed. Descriptions such as “Miscellaneous” are not permitted.

Include summary of remaining write-ins for Line 94 from the Overflow page on the separate line indicated.

Footnote (a):

Provide the total of each active status code in Column 1. The sum of all the counts ~~total~~ of all active status codes should equal 57.



Detail Eliminated To Conserve Space

QUARTERLY STATEMENT INSTRUCTIONS – HEALTH

SCHEDULE T – PREMIUMS AND OTHER CONSIDERATIONS

CURRENT YEAR TO DATE – ALLOCATED BY STATES AND TERRITORIES



Detail Eliminated To Conserve Space

Details of Write-ins Aggregated at Line 58 for Other Alien

List separately each alien jurisdiction for which there is no pre-printed line on Schedule T.

If the premium from an alien jurisdiction is due to relocation of current policyholders, the amount may be aggregated and reported as “Other Alien.” Premiums from jurisdictions in which there is active writing must be reported by jurisdiction and include premium from relocated policyholders residing in the respective jurisdiction.

Identify each alien jurisdiction by using a **three-character (ISO Alpha 3) country code followed by the name of the country (e.g., DEU Germany)**. For premium that can be aggregated and reported as “Other Alien” as stated in the previous paragraph, use “ZZZ” for the country code and “Other Alien” for the country name. A comprehensive listing of country codes is available in the appendix of the annual statement instructions.

Include summary of remaining write-ins for Line 58 from the Overflow page on the separate line indicated.

Footnote (a):

Provide the total of each active status code in Column 1. The sum of all the counts ~~total~~ of all active status codes should equal 57.



Detail Eliminated To Conserve Space

QUARTERLY STATEMENT INSTRUCTIONS – PROPERTY

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN

CURRENT YEAR TO DATE – ALLOCATED BY STATES AND TERRITORIES



Detail Eliminated To Conserve Space

Details of Write-ins Aggregated at Line 58 for Other Alien

List separately each alien jurisdiction for which there is no pre-printed line on Schedule T.

If the premium from an alien jurisdiction is due to relocation of current policyholders, the amount may be aggregated and reported as “Other Alien.” Premiums from jurisdictions in which there is active writing must be reported by jurisdiction and include premium from relocated policyholders residing in the respective jurisdiction.

Identify each alien jurisdiction by using a **three-character (ISO Alpha 3) country code followed by the name of the country (e.g., DEU Germany)**. For premium that can be aggregated and reported as “Other Alien” as stated in the previous paragraph, use “ZZZ” for the country code and “Other Alien” for the country name. A comprehensive listing of country codes is available in the appendix of the annual statement instructions.

Include summary of remaining write-ins for Line 58 from the Overflow page on the separate line indicated.

Footnote (a):

Provide the total of each active status code in Column 1. The sum of all the counts ~~total~~ of all active status codes should equal 57.



Detail Eliminated To Conserve Space

QUARTERLY STATEMENT INSTRUCTIONS – FRATERNAL

SCHEDULE T – DISTRIBUTION OF BUSINESS BY STATES AND TERRITORIES

CURRENT YEAR TO DATE – ALLOCATED BY STATES AND TERRITORIES



Detail Eliminated To Conserve Space

Details of Write-ins Aggregated at Line 58 for Other Alien

List separately each alien jurisdiction for which there is no pre-printed line on Schedule T.

If the premium from an alien jurisdiction is due to relocation of current policyholders, the amount may be aggregated and reported as “Other Alien.” Premiums from jurisdictions in which there is active writing must be reported by jurisdiction and include premium from relocated policyholders residing in the respective jurisdiction.

Identify each alien jurisdiction by using a **three-character (ISO Alpha 3) country code followed by the name of the country (e.g., DEU Germany)**. For premium that can be aggregated and reported as “Other Alien” as stated in the previous paragraph, use “ZZZ” for the country code and “Other Alien” for the country name. A comprehensive listing of country codes is available in the appendix of the annual statement instructions.

Include summary of remaining write-ins for Line 58 from the Overflow page on the separate line indicated.

Details of Write-ins Aggregated on Line 94 for Other Amounts Not Allocable By State

List separately items that have been credited to the premium account which are properly not allocable to a specific state or states, and which do not fit the descriptions on Lines 90 to 93. Descriptions must be sufficient to clearly disclose the nature of the items listed. Descriptions such as “Miscellaneous” are not permitted.

Include summary of remaining write-ins for Line 94 from the Overflow page on the separate line indicated.

Footnote (a):

Provide the total of each active status code in Column 1. The sum of all the counts total of all active status codes should equal 57.



Detail Eliminated To Conserve Space

QUARTERLY STATEMENT INSTRUCTIONS – TITLE

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN

CURRENT YEAR TO DATE – BY STATES AND TERRITORIES



Detail Eliminated To Conserve Space

Details of Write-ins Aggregated at Line 58 for Other Alien

List separately each alien jurisdiction for which there is no pre-printed line on Schedule T.

If the premium from an alien jurisdiction is due to relocation of current policyholders, the amount may be aggregated and reported as “Other Alien.” Premiums from jurisdictions in which there is active writing must be reported by jurisdiction and include premium from relocated policyholders residing in the respective jurisdiction.

Identify each alien jurisdiction by using a **three-character (ISO Alpha 3) country code followed by the name of the country (e.g., DEU Germany)**. For premium that can be aggregated and reported as “Other Alien” as stated in the previous paragraph, use “ZZZ” for the country code and “Other Alien” for the country name. A comprehensive listing of country codes is available in the appendix of the annual statement instructions.

Include summary of remaining write-ins for Line 58 from the Overflow page on the separate line indicated.

Footnote (a):

Provide the total of each active status code in Column 1. The ~~sum of all the counts total~~ of all active status codes should equal 57.



Detail Eliminated To Conserve Space

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