PROPERTY & CASUALTY INSURERS

COMPANY NAME: ______________________________ **NAIC Company Code:** ______________

Contact: ______________________________ **Telephone:** ______________

REQUIRED FILINGS IN THE STATE OF: New Mexico   **Filings Made During the Year 2026**

(1) Checklist	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES* Domestic State	Domestic NAIC	Foreign State	(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 ½" x 14")	2	EO		3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E30)	EO	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 ½" x 14")	2	EO		5/15, 8/15, 11/15	NAIC	
	3	Protected Cell Annual Statement	EO	0	xxx	3/1	NAIC	
	4	Combined Annual Statement (8 ½" x 14")	2	EO		5/1	NAIC	
		II. NAIC SUPPLEMENTS						
	11	Accident & Health Policy Experience Exhibit	EO	EO		4/1	NAIC	
	12	Actuarial Opinion	EO	EO		3/1	Company	
	13	Actuarial Opinion Summary	EO	N/A		3/15	Company	
	14	Bail Bond Supplement	EO	EO		3/1	NAIC	
	15	Combined Insurance Expense Exhibit	EO	EO		5/1	NAIC	
	16	Credit Insurance Experience Exhibit	EO	EO	xxx	4/1	NAIC	
	17	Cybersecurity Insurance Coverage Supplement	EO	EO		4/1	NAIC	
	18	Director and Officer Insurance Coverage Supplement	EO	EO		3/1, 5/15, 8/15, 11/15	NAIC	
	19	Exhibit of Other Liabilities By Lines of Business as Reported on Line 17 of the Exhibit of Premiums and Losses	EO	EO		3/1	NAIC	
	20	Financial Guaranty Insurance Exhibit	EO	EO		3/1	NAIC	
	21	Insurance Expense Exhibit	EO	EO	xxx	4/1	NAIC	
	22	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit, Parts 1 and 2	EO	EO	xxx	4/1	NAIC	
	23	Long-Term Care Experience Reporting Forms	EO	EO	xxx	4/1	NAIC	
	24	Management Discussion & Analysis	EO	EO		4/1	Company	
	25	Market Conduct Annual Statement Premium Exhibit for Year	EO	EO		3/1	NAIC	
	26	Medicare Part D Coverage Supplement	EO	EO		3/1, 5/15, 8/15, 11/15	NAIC	
	27	Medicare Supplement Insurance Experience Exhibit	EO	EO	xxx	3/1	NAIC	
	28	Mortgage Guaranty Insurance Exhibit	EO	EO	xxx	4/1	NAIC	
	29	Premiums Attributed to Protected Cells Exhibit	EO	EO		3/1	NAIC	
	30	Private Flood Insurance Supplement	EO	EO		4/1	NAIC	
	31	Reinsurance Attestation Supplement	EO	EO	xxx	3/1	Company	
	32	Exceptions to Reinsurance Attestation Supplement	EO	N/A	xxx	3/1	Company	
	33	Reinsurance Summary Supplemental	EO	EO	xxx	3/1	NAIC	
	34	Risk-Based Capital Report	EO	EO		3/1	NAIC	
	35	Schedule SIS	EO	N/A	N/A	3/1	NAIC	
	36	Supplement A to Schedule T	EO	EO		3/1, 5/15, 8/15, 11/15	NAIC	
	37	Supplemental Compensation Exhibit	EO	N/A	N/A	3/1	NAIC	
	38	Supplemental Health Care Exhibit (Parts 1 and 2)	EO	EO		4/1	NAIC	
	39	Supplemental Investment Risk Interrogatories	EO	EO		4/1	NAIC	
	40	Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts	EO	EO		3/1	NAIC	
	41	Trusteed Surplus Statement	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
		III. ELECTRONIC FILING REQUIREMENTS						

(1) Checklist	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES* Domestic State	Domestic NAIC	Foreign State	(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
	61	Annual Statement Electronic Filing	EO	EO	xxx	3/1	NAIC	
	62	March .PDF Filing	EO	EO	xxx	3/1	NAIC	
	63	Risk-Based Capital Electronic Filing	EO	EO	N/A	3/1	NAIC	
	64	Risk-Based Capital .PDF Filing	EO	EO	N/A	3/1	NAIC	
	65	Combined Annual Statement Electronic Filing	EO	EO	xxx	5/1	NAIC	
	66	Combined Annual Statement .PDF Filing	EO	EO	xxx	5/1	NAIC	
	67	Supplemental Electronic Filing	EO	EO	xxx	4/1	NAIC	
	68	Supplemental .PDF Filing	EO	EO	xxx	4/1	NAIC	
	69	Quarterly Statement Electronic Filing	EO	EO	xxx	5/15, 8/15, 11/15	NAIC	
	70	Quarterly .PDF Filing	EO	EO	xxx	5/15, 8/15, 11/15	NAIC	
	71	June .PDF Filing	EO	EO	xxx	6/1	NAIC	
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountant's Letter of Qualifications	EO	EO	N/A	6/1	Company	
	82	Audited Financial Reports	EO	EO		6/1	Company	
	83	Audited Financial Reports Exemption Affidavit	EO	N/A	N/A		Company	
	84	Communication of Internal Control Related Matters Noted in Audit	EO	EO	N/A	8/1	Company	
	85	Independent CPA (change)	EO	N/A	N/A		Company	
	86	Management’s Report of Internal Control Over Financial Reporting	EO	N/A	N/A	8/1	Company	
	87	Notification of Adverse Financial Condition	EO	N/A	N/A		Company	
	88	Relief from the five-year rotation requirement for lead audit partner	EO	EO		3/1	Company	
	89	Relief from the one-year cooling-off period for an independent CPA	EO	EO		3/1	Company	
	90	Relief from the Requirements for Audit Committees	EO	EO		3/1	Company	
	91	Request to File Consolidated Audited Annual Statements	EO	N/A	N/A		Company	
	92	Request for Exemption to File Management’s Report of Internal Control Over Financial Reporting	EO	N/A	N/A		Company	
		V. STATE REQUIRED FILINGS* **						
	101	Corporate Governance Annual Disclosure***	EO	0		6/1	Company	
	102	Filings Checklist (with Column 1 completed)	Not Required	0			State	
	103	Form B-Holding Company Registration Statement	EO	0		4/15	Company	
	104	Form F-Enterprise Risk Report ****	EO	0		9/15	Company	
	105	ORSA *****	0	0		9/1	Company	
	106	Premium Tax	N/A	0	N/A	N/A	State	
	107	State Filing Fees	Varies	0	Varies	Varies	State	110-111
	108	Signed Jurat	2	0	Varies		NAIC	
	109	Group Capital Calculation **(File with lead state only)**	1	0	Varies			
	110	Annual Statement Filing Fee	$200	0	$200	3/1		A and C
	111	Annual Continuation of Certificate of Authority Fee	$200 per line of authority	0	$200 per line of authority	3/1		A and C

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

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

*****For those states that have adopted the NAIC Corporate Governance Annual Disclosure Model Act, an annual disclosure is required of all insurers or insurance groups by June 1. The Corporate Governance Annual Disclosure is a state filing only and should not be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state if filed at the insurance group level. For more information on lead states, see the following NAIC URL:** http://www.naic.org/public_lead_state_report.htm.

******For those states that have adopted the NAIC updated Holding Company Model Act, a Form F filing is required annually by holding company groups. Consistent with the Form B filing requirements, the Form F is a state filing only and should not be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state. For more information on lead states, see the following NAIC URL:**

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

*****For those states that have adopted the NAIC Risk Management and Own Risk and Solvency Assessment Model Act, a summary report is required annually by insurers and insurance groups above a specified premium threshold. The ORSA Summary Report is a state filing only and should not be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state if filed at the insurance group level. For more information on lead states, see the following NAIC URL:** http://www.naic.org/public_lead_state_report.htm

		NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
	A	Required Filings Contact Person:	Annual Statement Filing Fee and Annual Continuation of Certificate of Authority Fee- Ursula Almada at (505) 827-4524 Company.Licensing@osi.nm.gov Fraud Assessment Fee Contact Victoria Baca at Victoriaa.Baca@osi.nm.gov
	B	Mailing Address:	**Overnight or second day Mail ONLY:** Office of Superintendent of Insurance 1120 Paseo de Peralta, 4th Floor Santa Fe, NM 87501 **USPS Mail ONLY:** PO Box 1689 Santa Fe, NM 87504
	C	Mailing Address for Filing Fees: Effective immediately, The Office of Superintendent of Insurance will no longer accept checks with any other names and will be returned to the sender. Please be advised that the return check does not constitute payment of the amount due. Make all checks payable to the "OSI" or "Office of Superintendent of Insurance".	Annual Statement Filing Fee and Annual Continuation of Certificate of Authority Fee- Invoices will NOT be available on the OSI Website; they will be emailed from SBS the first week of January 2025. Checks will only be accepted for the Annual Statement Filing Fee and the Continuation of Certificate of Authority Fee. **Overnight or second day Mail ONLY:** Office of Superintendent of Insurance 1120 Paseo de Peralta, 4th Floor Santa Fe, NM 87501 **USPS Mail ONLY:** PO Box 1689 Santa Fe, NM 87504 Any questions, please direct them to Ursula Almada at (505)827-4524 or email at Company.Licensing@osi.nm.gov
	D	Mailing Address for Premium Tax Payments: **On January 1, 2020, the New Mexico Office of Superintendent of Insurance will no longer be responsible for the collection of Premium and Surtax (Surplus Line, and Workman's Comp included) Taxes**	The collection responsibility will be transferred to the New Mexico Taxation and Revenue Department (TRD) on January 1, 2020. TRD can be contacted at: http://www.tax.newmexico.gov/

			All hard copy filings must bear a U.S. postmark or a courier service pick-up date no later than the indicated due date. New Mexico domestic company electronic filing must be received by the contact person no later than the indicated due date. Electronic (PDF) versions of filings shall be sent by email. If the file is too large to send by email, upload it to your FTP site and email the contact person instructions to download it. Do not send Zip files. Our firewall will block them.
	E	Delivery Instructions:	All hard copy filings must bear a U.S. postmark or a courier service pick-up date no later than the indicated due date. New Mexico domestic company electronic filing must be received by the contact person no later than the indicated due date. Electronic (PDF) versions of filings shall be sent by email. If the file is too large to send by email, upload it to your FTP site and email the contact person instructions to download it. Do not send Zip files. Our firewall will block them.
	F	Late Filings:	The Superintendent may, for good cause, grant a reasonable extension of time for filing the annual statement on or before March 1. Send all requests for filing extensions to the Financial Regulation Bureau contact before the due date of the item being filed.
	G	Original Signatures:	Follow NAIC instructions when providing signatures and notary/certification.
	H	Signature/Notarization/Certification:	Follow NAIC instructions when providing signatures and notary/certification.
	I	Amended Filings:	Amended items must be filed within 10 days of their amendment, along with an explanation of why the filing

	J	Exceptions from normal filings:	The Superintendent may, for good cause, grant a reasonable extension of time for filing the annual statement on or before March 1. Send all requests for filing extensions to the Financial Regulation and Examinations Division before the due date of the filed item at examinations.osi@osi.nm.gov
	K	Bar Codes (State or NAIC):	New Mexico does not use Bar Codes, but NAIC does. Please refer to NAIC filing requirements.
	L	Signed Jurat:	A signed and witnessed Jurat page is required for domestic companies. It shall be submitted with each of the two hard copies and one electronic copy of the Annual and Quarterly Financial Statement Filing.
	M	NONE Filings:	Follow NAIC filing requirements.
	N	Filings new, discontinued or modified materially since last year:	Annual Renewal Requirements: Please visit the OSI Webpage/ Company Licensing Bureau page at www.osi.state.nm.us/pages/bureaus/company/resources/renewals Company Licensing no longer requests the Certificate of Deposit, Certificate of Compliance, and Certificate of Valuation.

General Instructions
For Companies to Use Checklist

Please Note: **This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will not be sending their own checklist this year.**

Electronic filing is intended to be filing(s) submitted to the NAIC via the NAIC Internet Filing Site which eliminates the need for a company to submit diskettes or CD-ROM to the NAIC. Companies are not required to file hard copy filings with the NAIC.

Column (1) Checklist

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when submitting information to the state.

Column (2) Line #

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) Required Filings

Name of item or form to be filed.

The ***Annual Statement Electronic Filing*** includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions.* This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The ***March .PDF Filing*** is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The ***Risk-Based Capital Electronic Filing*** includes all risk-based capital data.

The ***Risk-Based Capital.PDF Filing*** is the .pdf file for risk-based capital data.

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

The ***Supplemental.PDF Filing*** is the .pdf file for all supplemental schedules and exhibits due April 1.

The ***Quarterly Statement Electronic Filing*** includes the complete quarterly statement data.

The ***Quarterly Statement.PDF Filing*** is the .pdf file for quarterly statement data.

The ***Combined Annual Statement Electronic Filing*** includes the required pages of the combined annual statement and the combined Insurance Expense Exhibit.

The ***Combined Annual Statement.PDF Filing*** is the .pdf file for the Combined annual statement data and the combined Insurance Expense Exhibit.

The ***June .PDF Filing*** is the .pdf file for the Audited Financial Statements and Accountants Letter of Qualifications.

Column (4) Number of Copies

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (EX) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (EX) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. **Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.**

Column (5) Due Date

Indicates the date on which the company must file the form.

Column (6) Form Source

This column contains one of three words: "NAIC," "State," or "Company," If this column contains "NAIC," the company must obtain the forms from the appropriate vendor. If this column contains "State," the state will provide the forms with the filing instructions. If this column contains "Company," the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions.*

Column (7) Applicable Notes

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes before submitting a filing.

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