TITLE COMPANIES

COMPANY NAME:	NAIC Company Code:					
Contact:		Telephone:				
REQUIRED FILINGS IN THE STATE OF:	MISSOURI	Filings Made During the Vear 2025				

(1)	(2)	(3)	(4)			(5)	(6)	(7)
Checklis	Line #	REQUIRED FILING FOR THE ABOVE	NUMBER OF COPIES* Domestic Foreig		Foreig	DUE	FORM SOURCE**	APPLICABLE NOTES
t	Line #	STATE	Don	estic	n	DATE	SOURCE	NOTES
			State	NAIC	State			
		I. NAIC FINANCIAL STATEMENTS						
								B(c), G, H(a), I,
								L, N(a)
	1	Annual Statement (8 ½" x 14")	ЕО	EO	XXX	3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages	7.0	7.0		0.4	37.170	D() - 3-()
		E01-E29)	ЕО	ЕО	XXX	3/1	NAIC	B(c), I, N(a)
						5/15,		B(c), G, H(a), I,
	2	Quarterly Financial Statement (8 ½" x 14")	EO	EO	XXX	8/15, 11/15	NAIC	L, N(a)
	2	Quarterly Financial Statement (8 /2 X 14)	LO	EO	ΛΛΛ	11/13	NAIC	
		II. NAIC SUPPLEMENTS		1	I	<u> </u>		1
	11	Actuarial Opinion						G, I, J(a), N(a),
		1 Total Committee of the Committee of th	EO	EO	XXX	3/1	Company	N(d)
	12	Investment Risk Interrogatories	ЕО	ЕО	XXX	4/1	NAIC	I, M
	13	Management Discussion & Analysis	ЕО	ЕО	XXX	4/1	Company	I, N(a)
	14	Schedule SIS	ЕО	N/A	N/A	3/1	NAIC	I, M
	15	Supplemental Compensation Exhibit	ЕО	N/A	N/A	3/1	NAIC	B(c), I, X
	16	Supplemental Schedule of Business Written						I, M
		By Agency	ЕО	N/A	XXX	4/1	NAIC	
		III. ELECTRONIC FILING						
		REQUIREMENTS		1	ı	T	1	1
	61	Annual Statement Electronic Filing	XXX	EO	Xxx	3/1	NAIC	
	62	March .PDF Filing	XXX	ЕО	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 Statement Electronic Filing				5/15,		
			XXX	EO	xxx	8/15, 11/15	NAIC	
	66	Quarterly .PDF Filing	АЛЛ	EO	λλλ	5/15,	NAIC	
	00	Quarterly .1 D1 1 ming				8/15,		
			XXX	EO	XXX	11/15	NAIC	
	67	June .PDF Filing	XXX	ЕО	XXX	6/1	NAIC	
		IV. AUDIT/INTERNAL CONTROL						
		RELATED REPORTS						
	81	Accountants Letter of Qualifications	EO	EO	N/A	6/1	Company	J, N(a)
	82	Audited Financial Reports						I, J, N(a), N(c)
			ЕО	EO	XXX	6/1	Company	
	83	Audited Financial Reports Exemption	П.	3.77	3.77			H(a), J
	0.4	Affidavit	ЕО	N/A	N/A		Company	D
	84	Communication of Internal Control Related	EO	EO	NT/A	0/1	Com	R
	0.5	Matters Noted in Audit	EO	EO	N/A	8/1	Company	NI(-) NI(-)
	85	Independent CPA (change)	ЕО	N/A	N/A	 	Company	N(a), N(c)
	86	Management's Report of Internal Control Over Financial Reporting	EO	NI/A	NI/A	8/1	Commons	R
	87	Notification of Adverse Financial Condition	EO EO	N/A N/A	N/A N/A	0/1	Company Company	B(c)
	88	Request for Exemption to File	EO	N/A N/A	N/A N/A	1	Company	B(c), J
		Relief from the five-year rotation	ĿU	IN/A	1N/A	1	Company	B(c), J(b)
	89							

(1)	(2)	(2)		(4)		(5)	(0)	(7)
(1)	(2)	(3)	(4)			(5)	(6)	(7) APPLICABLE
Checklis	Line #	REQUIRED FILING FOR THE ABOVE	NUMBER OF COP Domestic		Foreig	DUE	FORM SOURCE**	NOTES
t	Line #	STATE			n	DATE	SOURCE	NOTES
·		SIAIL	State	NAIC	State	DAIL		
	90	Relief from the one-year cooling off period	State	IVAIC	State			B(c), J(a)
	90	for independent CPA	EO	EO	N/A	3/1	Company	D(C), J(a)
	91	Relief from the Requirements for Audit	EU	EO	1 V /A	3/1	Company	B(c), J(a)
	91	Committees	EO	EO	N/A	3/1	C	D(C), J(a)
		Commutees	EU	EU	IN/A	3/1	Company	
		V CTATE DECLIDED EII INCC+++						
	101	V. STATE REQUIRED FILINGS***	0			1	Gr. 4	<u> </u>
	101	Filings Checklist (with Column 1	U	0	0		State	
	1.00	completed)		0	373737	2/1	NATO	D() G H() I
	102	Signed Jurat – Annual	1	0	XXX	3/1	NAIC	B(c), G, H(a), I,
							_	L
	103	Premium Tax Return	1	0	XXX	3/1	State	A, Q
	104	Title Premium Reserve	EO	N/A	1	3/1	State	G, H(a), I
	105	Supplement to page 19 of the Annual	EO	N/A	1	3/1	State	W
		Statement						
	106	Statement of Basket Clause (MO 375-0097)	EO	N/A	N/A	3/1	State	B(c), M, T,
	107	Updated Biographical Affidavits	EO	N/A	N/A	3/1	NAIC	B(c), G, H(a), I,
								V, X, Domestic
								Only
	108	Form B Supplement Fees Between Insurers	ЕО	N/A	N/A	5/1	State	B(c), G, H(b), I,
		and Affiliates						S, X
	109	Form B Holding Company Registration	ЕО	N/A	N/A	5/1	Company	B(c), I, X
	110	Form C Summary of Registration	ЕО	N/A	N/A	5/1	Company	B(c), G, H(b),I,
		, E					1 3	S, X
	111	Form F – Enterprise Risk Report ****	ЕО	N/A	XXX	5/1	State	B(c), G, H(a), I,
								S, X
	112	Signed Jurat – Quarterly	1	0	XXX	5/15,	NAIC	B(c), G, H(a), I,
	112	Signou variat Qualitati	•		12121	8/15,	1.110	L
						11/15		
	113	Corporate Governance Annual	EO	N/A	N/A	6/1	Company	B(c), G, H(b), X
	115	Disclosure***	LO	1,771	1,71	5/1	Company	2(0), 0, 11(0), 11
	114	State Filing Fees	ЕО	0	1	7/1	State	C, O
	115	Application for Renewal of C of A	EO	N/A	1	7/1	Company	G, H(a), N(b)
	116	ORSA *****	1	N/A	N/A	2022	Company	B(c), G, H(b), X
	117	Group Capital Calculation (Filed with	EO	0	N/A	8/1	NAIC	G, I, J(a), N(f),
	11/	Lead State Only)	EO	U	1 N/ PA	0/1	IVAIC	X
		Leau State Only)		1	<u> </u>]	Λ

^{*}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 <u>not</u> 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 <u>not</u> 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