## CLARIFYING THE DEFINITION OF INDIVIDUAL LIFE INSURANCE FOR PURPOSES OF DETERMINING THE PREMIUM TAX RATE

## ADDITIONAL REGULATIONS NOTICE INFORMATION (AS 44.62.190(d))

1.			partment of Commerce, Community, and	
^	Economic Development		T	
2.	General subject of regulation: <u>Individual Life Insurance</u>			
3.	Citation of regulation (may be grouped): 3 AAC 21.580  Department of Law file number, if any:			
4.	Department of Law file num	ber, if any:		
5.	Reason for the proposed acti	on:		
	( ) Compliance with federal law or action (identify)			
	( ) Compliance with new		The state of the s	
		_	t decision (identify)	
	( <b>v</b> ) Development of prog		•	
	( ) Other (identify):			
_				
5.	Appropriation/Allocation:	Insurance Operati	ons/Insurance Operations	
7.	Estimated annual costs in the aggregate to comply with the proposed action to:			
	A private person: None are anticipated.			
		_		
		•		
8.	Cost of implementation to the state agency and available funding (in thousands of dollars):			
		Initial Year	Subsequent	
		FY <u>19</u>	Years	
	Operating Cost	\$_0	\$ <u>0</u>	
	Capital Cost	\$_0	\$ <u>0</u>	
	1002 Federal receipts	\$_0	\$_0	
	1003 General fund match	\$_0	\$ <u>0</u>	
	1004 General fund	\$ 0	\$_0	
	1005 General fund/		T	
	program	\$ 0	\$ 0	
	Other (identify)	\$_0	\$_0	
).	The name of the contact move	on for the recorder	ion.	
•	The name of the contact pers Name: <u>Jackson Willard</u>	on for the regulat	ion.	
	Title: Regulations Specialist II			
	Address: Division of Insura			
	Tradices - Division of Hisms	11100		

Telephone:(907) 465-8486 E-mail addressjackson.willard@alaska.gov	
E-mail address jackson.willard@alaska.gov	
The origin of the proposed action:	
Staff of state agency	
Federal government	
General public	
Petition for regulation change	
Other (identify)	
Date: 2/22/2019 Prepared by:	
[signature]	
Name (printed): <u>Jackson Willard</u>	
Title (printed): Regulations Specialist II	
Telephone: (907) 465-8486	