



2019 State Chapter Action Plan

The Annual State Action Plan provides valuable information on your chapter's plans for the year in seven key areas. The information in this report will help NAIFA identify gaps so we can develop chapter resources, tools and training to meet the needs of our chapter leaders and field staff.

- Section 1. Advocacy
- Section 2. Membership
- Section 3. Programs/Professional Development
- Section 4. Communications/Marketing
- Section 5. Volunteers
- Section 6. Finance
- Section 7. Governance

If, while completing this report, you identify areas where you need immediate support to ensure your chapter's success, please reach out to Michele Grassley Clarke, Vice President of Member and Chapter Services, 703-770-8219, mgc@naifa.org, to schedule a planning session with your state board.

INSTRUCTIONS: Submitting this report is required to remain compliant as a NAIFA Chapter. Please submit only one report for your chapter. You do not have to complete the entire report in one session. The system allows you to save your report, obtain a unique URL and return later to submit additional information. If you opt to complete the report in more than one session, please make sure you finish the report and submit it by the deadline.

DEADLINE: Thursday, January 31, 2019

State Chapter *

Submitted by: *

First Name

Last Name

Submitter's Email *

A copy of this report will be sent to this email address upon completion of the report.

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Section 1. Advocacy

State Day on the Hill

Type of Day on the Hill Planned in 2019 *

- Co-Hosted Event (with other organizations)
 NAIFA Only Event
 Not Planning a Day on the Hill in 2019

Attendance Goal *

150

What is your attendance goal (other than legislators)?

Date of Day on the Hill *

2/1/2019

If you've scheduled your Day on the Hill, enter the date. If you haven't scheduled the event, please indicate the month you plan to hold it.

NAIFA Congressional Conference (ConCon)

ConCon Attendance Goal *

25

What is your chapter's 2019 Congressional Conference attendance goal (or how many members from your chapter are expected to attend)?

Chapter Executive Attending ConCon *

Yes No

Will your chapter executive attend Congressional Conference?

ConCon Subsidy *

Yes No

Will your chapter reimburse or subsidize any members (including board members) attending the 2019 Congressional Conference?

ConCon Subsidy Budget *

\$ 5000

How much has your chapter budgeted for Congressional Conference subsidies or travel reimbursements (excluding expenses for the chapter executive)?

ConCon Subsidy Description *

Our state plans to...

Briefly describe your state's Congressional Conference subsidy and/or reimbursement program (i.e., who is eligible for the subsidy/reimbursement, amount of subsidy/reimbursement, etc.).

IFAPAC

PAC Goal *

\$ 100000

What is your state's 2019 IFAPAC Fundraising Goal?

PAC Contributors Goal *

350

What is your state's goal for the number of members who will contribute to IFAPAC in 2019 (contributor goal)?

Budgeted PAC Admin Fund Chapter Contribution *

2400

How much has your state budgeted to contribute to IFAPAC's Administrative Fund in 2019?

PAC Committee Size *

10

Other than the chair and members of your state board, how many members are on your PAC Committee?

Grassroots Involvement (formerly APIC)

In-District Meetings/Events with Federal Legislators *

100

What percentage of your Congressional delegation (Senators and Representatives) are you planning to meet with in YOUR state (not in Washington) at least once this year?

Meetings/Events with State Legislators *

50

Other than your Day on the Hill and your state lobbyist's activities, what percentage of your state legislators are you planning to meet with this year? (include PAC deliveries, town hall meetings, events your affiliates will host with legislators, etc.)

Key Contacts for State Legislators *

40

Please provide the percentage of state legislators for whom at least one member has been identified as a key contact. If you do not maintain a key contact list for state legislators, enter "0".

Plans to Engage First Timers and YATs in Grassroots Activities

Our state plans to...

Describe any plans you have to encourage first-timers and young advisors in grassroots activities.

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Section 2. Membership

New Member Goal*

110.00

What is your goal for new members recruited this year?

Retention Goal*

85%

What is your goal for membership retention in this year (i.e., 85%)?

Membership Committee Size*

10

Other than the chair and members of your state board, how many members are on your Membership Committee?

Recruitment Activities*

Our recruitment activities will include...

Please describe recruitment activities you have planned.

Retention Activities*

Our retention activities will include...

Please describe retention activities you have planned.

New Member On-boarding Activities*

Our new member on-boarding activities include...

Please describe how your chapter plans to on-board (welcome, engage, provide orientation) new members.

Member Recognition*

We plan to...

Describe any plans you have to recognize new members, long-time members, NAIFA Quality Award recipients and/or members receiving certifications or designations.

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Section 3. Programs/Professional Development

NAIFA Programs

Leadership in Life Institute (LILI) *

15

What is your goal for how many members from your state will graduate from LILI in 2019 (either from a class you are hosting or through a multi-state class in which your members will participate)? (If none, enter 0.)

LACP *

20

What is your goal for how many members from your state will receive the LACP certification in 2019? (If none or unknown, enter 0.)

LUTCF *

10

What is your goal for how many members from your state will earn the LUTCF designation in 2019 (either from classes you are hosting, through online classes or through a multi-state class in which your members will participate)? (If none or unknown, enter 0.)

CE Credits for NAIFA Webinars *

Yes No

Is your state planning to file for Continuing Education Credits for qualifying NAIFA webinars this year?

Skill Builders *

Time Management Workshop Prospecting Workshop Business Succession Planning Workshop None

Please select the Skill Builders workshops your state is planning to offer in 2019.

NAIFA Performance + Purpose Conference

P+P Attendance Goal *

30

What is your goal for how many members from your chapter will attend the NAIFA P+P Conference? (If none or unknown, enter 0.)

Chapter Executive Attending P+P *

Yes No

Will your chapter executive attend P+P?

P+P Subsidy *

Yes No

Will your chapter reimburse or subsidize any members (including board members) attending the 2019 P+P Conference?

P+P Subsidy Budget *

\$ 5000

How much has your chapter budgeted for P+P subsidies or travel reimbursements (excluding expenses for the chapter executive)?

P+P Subsidy Description *

Our state plans to...

Briefly describe your chapter's P+P subsidy and/or reimbursement program (i.e., who is eligible for the subsidy/reimbursement, amount of subsidy/reimbursement, etc.).

State Annual Meeting/Convention/Sales Congress

State Annual Meeting Planned *

Yes No

Will your state host a State Convention, Sales Congress or similar program in 2019?

State Convention Attendance Goal *

300

What is your attendance goal (other than exhibitors and speakers)?

State Convention Dates *

5/1/2019

Provide the dates of your event. If the dates have not been set, provide the month you plan to hold it.

Other In-Person Meetings/Events

Only include in-person meetings/events planned by the state and/or affiliates excluding your state Day on the Hill and state Annual Meeting, covered elsewhere in this report. Please do NOT include programs planned by local chapters. Local chapters will submit their own meeting/event schedules as part of their chapter action plan.

of Communities/Locations for Meetings *

of Meetings Per Location *

15

In how many cities or communities will you host meetings (including social/networking events) in 2019?

8

On average, how many meetings (including social events) are you planning to host in each location in 2019?

of Social/Networking Events *

8

How many social/networking events is your chapter or its affiliates planning to host in 2019?

Calendar of Events

Please use the the [2019 Program Calendar Template](#) to report your calendar of events for 2019, including affiliate events.

Calendar of Events *

Choose File No file chosen

Excel Spreadsheet using Program Calendar Template REQUIRED.

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Legislative Updates (if separate from your newsletter)								
State Legislative Action Alerts (if separate from your newsletter)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	
Membership Directory Distributed Online or Electronically	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Membership Directory Distributed by Mail	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Indicate which types of communications from the list above you are planning to distribute in 2019 and at what frequency.

Other publications/communications (not listed above)

Press Releases *

Approximately how many press releases are you planning to issue this year? (If none, enter "0")

Types of Press Releases *

- Meeting/Event Announcements
- Board Elections
- State Legislative/Regulator Positions
- Industry Awareness Campaigns (i.e., Life Insurance Awareness Month)
- Community Service Projects/Charitable Donations
- Members Attending State Day on the Hill
- Members Attending NAIFA Congressional Conference
- Members Attending Meetings with Legislators
- Member Recognition (awards, designations/certifications, etc.)
- Other:

Select the types of press releases you are planning to issue this year.

Community Service Activities *

Describe any community service activities planned by your chapter or its affiliates in 2019. (If none, enter "none".)

Program/Event Promotion *

	Not Applicable	Email	Chapter Website (banners, calendar, microsite)	Unpaid Social Media Posts	Paid Social Media Posts/Ads	Direct Mail (Postcard, Brochure, Flier)	Printed Material Distributed at Agencies	Printed Material Distributed at NAIFA Meetings	Telemarketing (either by staff, volunteers or third party)
State Annual Meeting/Convention/Sales Congress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State Day on the Hill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other State-Planned Meetings/Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local Chapter-Planned Meetings/Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affiliate-Planned Meetings/Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership in Life Institute Class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State or Local Chapter LUTC Classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAIFA Congressional Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAIFA Performance + Purpose Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please select the ways your chapter is planning to promote various types of events listed above.

Marketing to Nonmembers *

Other than social media, describe how you market programs, meetings and events to nonmembers.

Nonmember Attendees *

What is your goal for the number of nonmember attendees at state and affiliate meetings and events this year (including social events)? (If none, enter "0".)

Marketing Budget *

What percentage of your budget do you allocate to marketing?

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Section 5. Volunteers

As you think of volunteer roles in your chapter, don't focus only on formal committee roles. Remember to count members who speak without compensation, help out at meetings, serve as mentors, help with PAC fundraising, deliver PAC checks, etc.

Volunteer Recruitment *

We recruit volunteers by...

Describe how you identify and recruit members to serve in volunteer roles, including affiliate volunteers.

Volunteer Orientation *

We train our volunteers through...

Describe your process for volunteer on-boarding, training or orientation. (If you don't have a formal process, enter "none.")

Volunteer Recognition *

We recognize our volunteers by...

Describe your plans to recognize volunteers in 2019. (If you do not have a volunteer recognition plan, enter "none.")

Ad Hoc Volunteer Roles *

- Speaking/Moderating
- Writing/Editing Newsletter Articles or Blog Posts
- Mentoring
- Participating in Community Service Projects
- Onsite Support at Meetings (registration, greeters, speaker hosts, etc.)
- Welcoming New Members
- Following Up with Lapsed Members
- Distributing Promotional Materials to Agencies
- Testifying to Legislative or Regulatory Bodies
- Monitoring Legislative or Regulatory Issues
- Representing the chapter at industry, company or legislative events
- Posting to chapter social media
- Other:

Select the roles you have identified for volunteers other than formally serving on a committee.

State Volunteer Goal *

40

Including state board and state committees, how many volunteers are you hoping to engage at the state level in 2019?

Affiliate Volunteer Goal *

50

Other than members serving on the state board or state committees, how many volunteers are you hoping to engage as affiliate volunteers in 2019?

Volunteer Role Descriptions

Choose File No file chosen

If you have written job descriptions or role descriptions for any of your volunteer positions, even if only a sentence or two, please share them with us.

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Section 6. Finance

Accounting Year Change *

Yes No

Is your chapter planning to change from a fiscal year ending 6/30 to a calendar year for accounting purposes?

Effective Date of New Accounting Year *

1/1/2019 1/1/2020 1/1/2021

Other:

Indicate when you are planning to make the switch to a calendar year.

Accounting Method *

Cash Basis

Accrual Basis

Budget *

Choose File No file chosen

Please provide either your fiscal year ending 6/30/2019 budget or your calendar year ending 12/31/2019 budget. (Excel Spreadsheet format preferred.)

Balance Sheet *

Choose File No file chosen

Please provide your balance sheet for the period ending 12/31/2018.

Income Statement *

Choose File No file chosen

Please provide your statement of revenues and expenditures (income statement) for the period ending 12/31/2018.

Foundation *

\$ 0

If your chapter has a separate 501(c)(3) foundation, please provide the total account balance (checking, savings, investments) as of 12/31/2018. If you do not have a foundation, enter 0.

PAC Political Funds *

\$ 5000

Balance of PAC Political Funds Accounts as of 12/31/2018.

PAC Administrative Funds *

\$ 5000

Balance of PAC Administrative Funds Accounts as of 12/31/2018.

Audit/Review *

Yes No

Is your chapter planning to have a third party or volunteer audit committee conduct a review or audit of your financial statements in 2019?

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Section 7. Governance

Officer/Board Terms *

Yes No

Is your chapter planning to change the terms of your officers/board to coincide with the calendar year?

Effective Date of New Officer/Board Terms *

1/1/2019 1/1/2020 1/1/2021

Other:

Indicate when you are planning to make the switch to a calendar year.

Bylaws *



Date your delegate council adopted or will adopt the new bylaws.

Proposed Bylaws *

[Choose File](#) **No file chosen**

Please submit a copy of your new bylaws for review prior to adoption to ensure compliance. If you have already adopted your new bylaws, please submit them for review.

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