



Franchise Tax Return for Insurance Corporations

Tax Law — Article 33

beginning

ending

Employer identification number, File number, Name, Number and street, City or town, State, ZIP code, Trade name, Business telephone number, Business group code number, Principal business activity, State or country of incorporation, date, Foreign corporations: date began business in NYS, Federal return was filed on: 1120-L, 1120-PC, Consolidated, Other

Do you do business, employ capital, own or lease property or maintain an office in the Metropolitan Commuter Transportation District? Have you been audited by the Internal Revenue Service in the past 5 years? Does this corporation have an interest in real property located in New York State? Has the controlling interest in the corporation's stock changed during the period covered in this return?

A. Payment - pay amount shown on line 19 — Make check payable to: New York State Corporation Tax

Schedule A — Computation of Tax and Installment Payments of Estimated Tax

Table with 22 rows for tax computation. Includes items like Allocated entire net income, Allocated business and investment capital, Alternative tax, Minimum tax, Allocated subsidiary capital, Life insurance company premiums, Total tax, Tax credits, Tax due, Tax surcharge, Balance due, Overpayment, Refund, Issuer's allocation percentage, Reinsurance allocation percentage.

Schedule B - Allocation of Reinsurance Premiums where Location of Risks Cannot Be Determined. (see instructions, Form CT-33-I)

A Name of Ceding Company <i>(Attach separate sheet if necessary)</i>	B Reinsurance Premiums Received	C Reinsurance Allocation %	D Reinsurance Premiums Allocated to New York <small>(Column B × Column C)</small>
Totals from attached sheet			
23 Total (add column D amounts) Include on line 24d			●

Schedule C - Computation of Allocation Percentage. If you do not claim an allocation, enter 100 on line 32. You may no longer compute premium allocation without regard to reinsurance premiums.

24a New York taxable premiums (see instructions)	24a	●		
24b New York ocean marine premiums (see instructions)	24b	●		
24c New York premiums on annuity contracts and on insurance for the elderly (see instructions)	24c	●		
24d New York premiums on reinsurance assumed from authorized companies	24d	●		
24e Total New York gross premiums (add lines 24a, 24b, 24c and 24d)	24e	●		
24f Less: New York premiums ceded that are included on line 24e	24f	●		
24g Total New York premiums	24g	●		
25 Total premiums	25	●		
26 New York premium percentage (divide line 24g by line 25)			26	% ●
27 Weighted New York premium percentage (multiply line 26 by nine)			27	% ●
28 New York wages, salaries, commissions and other compensation (see instructions)	28	●		
29 Total wages, salaries, commissions and other compensation	29	●		
30 New York payroll percentage (divide line 28 by line 29)			30	% ●
31 Total New York percentages (add line 27 and line 30)			31	% ●
32 Allocation percentage (divide line 31 by ten)			32	% ●

Schedule D - Computation and Allocation of Subsidiary Capital

A Description of Subsidiary Capital		B % of Voting Stock Owned	C Average Fair Market Value	D Current Liabilities Attributable to Subsidiary Capital	E Net Average Fair Market Value (Col C minus Col. D)	F Issuer's Allocation %	G Value Allocated To N.Y. State (Col E × Col. F)
<small>List each corporation (Attach separate sheet if necessary)</small>	Employer Ident. No.						
Totals from attached sheet							
33 Totals (add amounts in columns C, D and E)		●	●	●			
34 Allocated subsidiary capital (add column G amounts - enter on line 5)							●

Schedule E - Computation and Allocation of Business and Investment Capital

	A			C	
	Beginning of Year	B End of Year		Average Fair Market Value Basis	
35 Total assets from annual statement (balance sheet)	●	●	35	●	
36 Fair market value adjustment (attach computation — if negative amount, use parentheses)			36	●	
37 Non-admitted assets from annual statement			37	●	
38 Total assets (add lines 35, 36 and 37)	●	●	38	●	
39 Current liabilities			39	●	
40 Total capital (subtract line 39 from line 38)			40	●	
41 Subsidiary capital (line 33, column E)			41	●	
42 Business and investment capital (subtract line 41 from line 40)			42	●	
43 Assets, excluding subsidiary assets included on line 41, held as reserves under NYS Insurance Law Sec. 1303, 1304 and 1305 (value assets same as valued on line 38)	Beginning of Year	End of Year	43	●	
44 Adjusted business and investment capital (subtract line 43 from line 42)			44	●	
45 Allocated business and investment capital (multiply line 44 by the allocation percentage from line 32 - enter on line 2)			45	●	

Taxpayer's Name

Employer Identification Number

Schedule F - Computation of Adjustment for Gains or Losses on Disposition of Property Acquired Before January 1, 1974

You may no longer report gain or loss in the same manner you report it on your federal income tax return.

A Description of Property <i>(Attach separate sheet if necessary)</i>	B Cost	C Fair Market Price or Value on Jan. 1, 1974	D Value Realized on Disposition	E New York Gain (Loss)	F Federal Gain (Loss)
Totals from attached sheet					
46 Totals					
47 New York adjustment <i>(subtract column F from column E - enter on line 53)</i> Use parentheses for negative amounts.					

Schedule G - Computation and Allocation of Entire Net Income

(See instructions)

48 Federal taxable income	48	•	
Additions			
49 Dividends - received deduction used to compute line 48	49	•	
50 Dividend or interest income not included in line 48 <i>(attach list)</i>	50	•	
51 Interest to stockholders - <input type="text"/> less 10% or \$1,000, whichever is larger	51	•	
52 Federal net operating loss or operations loss	52	•	
53 Adjustment for gains or losses on disposition of property acquired prior to January 1, 1974 <i>(amount from line 47)</i>	53	•	
54 Deductions attributable to subsidiary capital <i>(attach list)</i>	54	•	
55 New York State franchise tax deducted on federal return <i>(attach list)</i>	55	•	
56a Amount deducted on your federal return as a result of a safe harbor lease	56a	•	
56b Amount which would have been required to be included on your federal return except for a safe harbor lease	56b	•	
57 ACRS deductions used in the computation of federal taxable income <i>(attach Form CT-399)</i>	57	•	
Property and casualty insurance corporation adjustments:			
58a Unearned premiums at the end of the preceding tax year excluded from "premiums earned" as a result of the reduction in the deduction for unearned premiums	58a	•	
58b Amount of difference between unpaid losses and discounted unpaid losses at the end of the preceding tax year <i>(attach separate sheet - see instructions)</i>	58b	•	
59 Other <i>(explain on separate sheet)</i>	59	•	
60 Total <i>(add lines 48 through 59)</i>	60	•	
Subtractions			
61 Interest, dividends and capital gains from subsidiary capital <i>(attach list)</i>	61	•	
62 50% of dividends from nonsubsidiary corporations <i>(attach list)</i>	62	•	
63 Gain on installment sales made prior to January 1, 1974 <i>(attach list)</i>	63	•	
64 New York net operating loss or operations loss <i>(attach statement showing computation)</i>	64	•	
65a Amount included on your federal return as a result of a safe harbor lease	65a	•	
65b Amount which could have been deducted on your federal return except for a safe harbor lease	65b	•	
66 Depreciation allowed by Section 1503(b)(10) <i>(attach Form CT-399)</i>	66	•	
Property and casualty insurance corporation adjustments:			
67a Unearned premiums at the end of the tax year included in "premiums earned" as a result of the reduction in the deduction for unearned premiums	67a	•	
67b Recapture of unearned premium reserve	67b	•	
67c Amount of the difference between unpaid losses and discounted unpaid losses at the end of the tax year <i>(attach separate sheet - see instructions)</i>	67c	•	
67d Reduction in deduction for losses incurred	67d	•	
68 Other <i>(explain on separate sheet)</i>	68	•	
69 Total subtractions <i>(add lines 61 through 68)</i>	69	•	
70 Entire net income <i>(subtract line 69 from line 60)</i>	70	•	
71 Allocated entire net income <i>(multiply line 70 by line 32 - enter on line 1)</i>	71		

Schedule H - Officers (appointed or elected) and Certain Stockholders - Include all officers, whether or not receiving any compensation, and all stockholders owning more than 5% of taxpayer's issued capital stock who received any compensation.

Table with 4 columns: A Name and address, B Social Security Number, C Official Title, D Salary and all Other Compensation Received From Corporation.

Schedule I - Computation of Premiums. Columns: A Premiums Taxable Under Section 1510, B Premiums Included in Tax Limitation Computation - Section 1505. Rows: Life Insurance Companies, Nonlife Insurance Companies, Insurance Corporations who receive more than 95% of their premiums from:

Schedule J - Computation of Retaliatory Tax Credit - For Corporations Organized or Domiciled in New York. Do not claim MTB Surcharge Retaliatory Tax Credit on this return. Use Form CT-33-R to claim this credit.

Table with 3 columns: A 1987, B 1988, C 1989. Rows: 83 Tax less credits except for retaliatory tax credit, 84 Retaliatory tax credit claimed in 1987 and 1988, 85 Balance, 86 90% of retaliatory taxes paid in 1989 on 1987 premiums and income, 87 90% of the retaliatory taxes paid in 1989 on 1988 premiums and income, 88 90% of retaliatory taxes paid in 1989 on 1989 premiums and income, 89 Total retaliatory tax credit claimed this year, 90 Retaliatory tax credit used on line 11 to reduce tax due on line 12a to zero, 91 Balance of retaliatory tax credit, 92 Retaliatory tax credit to be carried forward, 93 Retaliatory tax credit to be refunded.

Schedule K - Computation of Issuer's Allocation Percentage - (Penalty will be imposed for failure to supply this information). Rows: 94 New York gross direct premiums, 95 Total gross direct premiums, 96 Issuer's allocation percentage.

Certification of the Corporation: I hereby certify that this return and any attachments are to the best of my knowledge and belief true, correct and complete.

Table with 3 columns: Date, Signature of elected officer or authorized person / Signature of Individual or Name of Person Preparing this Return, Official Title / Preparer's Address.

Mail returns to: NYS Corporation Tax, Processing Unit, P.O. Box 1909, Albany, NY 12201-1909

Attach a copy of your complete federal return, a copy of your Annual Report of Premiums as filed with the New York State Insurance Department and copies of the following schedules as contained in your Annual Statement: balance sheet, the Analysis of Assets Exhibit and the Summary by Country portion of Schedule D.