

Name	Employer identification number
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Schedule C — Computation of business and investment capital *(see instructions)*

	A Beginning of year	B End of year	C Average fair market value basis
4 Total assets from annual statement (<i>balance sheet</i>) ...	4.		
5 Fair market value adjustment (<i>attach computation; if negative amount, use parentheses</i>)	5.		
6 Nonadmitted assets from annual statement	6.		
7 Current liabilities	7.		
8 Assets, excluding subsidiary assets included on line 2, column C, held as reserves under New York State Insurance Law sections 1303, 1304, and 1305 (<i>use same method to value assets as on lines 4 through 6</i>)	8.		

Schedule D — 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				9.	
9 Totals				9.	
10 New York adjustment (<i>subtract line 9, column F, from line 9, column E; enter here and on line 68 of Form CT-33-A or Form CT-33-A/B; use parentheses for negative amounts</i>)					10.

Schedule E — 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)*

A Name and address <i>(give actual residence; attach separate sheet if necessary)</i>	B Social security number	C Official title	D Salary and all other compensation received from corporation
Totals from attached sheet			
11 Totals (<i>add column D amounts; enter here and on line 87 of Form CT-33-A or Form CT-33-A/B</i>)			11.

Certification. Under penalties of perjury, I declare that this corporation is allowed to file on a combined basis under New York State Law and is also liable for the group tax liability, and I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete.

Signature of authorized person	Official title	Date	
Paid preparer use only	Firm's name (<i>or yours if self-employed</i>)	ID number	Date
	Address	Signature of individual preparing this return	