



CT-33 (7/89)

Franchise Tax Return for Insurance Corporations

Article 33, Tax Law

beginning ending

If name, EIN, address or owner/officer information has changed, file Form DTF-95 (see instructions)

Employer identification number, File number, Business group code no. federal return, Name, Principal business activity, Trade name, Date of incorporation, Date, Number and street, State or country of incorporation, City or town, State, ZIP Code, Date began business in NY

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? Yes No

Have you been audited by the Internal Revenue Service in the past 5 years? Yes No

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: 1. Allocated entire net income, 2. Allocated business and investment capital, 3. Alternative tax, 4. Minimum tax, 5. Allocated subsidiary capital, 6. Life insurance company premiums, 7. Nonlife insurance company premiums, 8. Total, 9. Limitation on tax, 10. Tax - Amount from line 8 or 9, 11. Tax credits, 12a. Tax due, 12b. Tax surcharge, 12c. Tax and tax surcharge due, 13. First installment for period following that covered by this return, 14. Total, 15. Prepayments, 16. Balance, 17. Interest, 18. Additional charges, 19. Balance Due, 20. Overpayment, 21. Issuer's allocation percentage, 22. Reinsurance allocation percentage

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.

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

(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 <i>(Column (B) × Column (C))</i>

23. Total (including items on attached sheet) Include on line 24(d), Schedule C. ●

Schedule C - Computation of Allocation Percentage. If no allocation is claimed, enter 100 on line 32. An election to compute premium allocation without regard to reinsurance premiums is no longer available.

24. New York Premiums			
(a) New York taxable premiums (see instructions)	24a	●	
(b) New York ocean marine premiums (see instructions)	24b	●	
(c) New York premiums on annuity contracts and on insurance for the elderly (see instructions)	24c	●	
(d) New York premiums on reinsurance assumed from authorized companies	24d	●	
(e) Total New York gross premiums (add lines 24(a), (b), (c) and (d))	24e	●	
(f) Less: New York premiums ceded that are included on line 24(e)	24f	●	
(g) Total New York premiums	24g	●	
25. Total premiums	25	●	
26. New York premium percentage (divide line 24(g) 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 <i>List each item (Attach separate sheet if necessary)</i>		(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))
33. Totals (including items on attached sheet)		●	●	●			●
34. Allocated subsidiary capital (enter on line 5, Schedule A)							

Schedule E - Computation and Allocation of Business and Investment Capital

	(A) Beginning of Year	(B) End of Year	(C) Average Fair Market Value Basis
	35. Total assets from annual statement (balance sheet)	●	●
36. Fair market value adjustment (itemize on separate sheet) (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 (from Schedule D, line 33(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	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 line 32, Schedule C - enter on line 2, Schedule A)			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

An election to report gain or loss in the same manner it is reported for federal income tax purposes is no longer available.

Table with 6 columns: (A) Description of Property, (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). Includes rows for totals and adjustments.

Schedule G - Computation and Allocation of Entire Net Income

(See instructions)

Table for Schedule G with 71 numbered rows and columns for additions and subtractions. Includes sections for Additions (lines 49-59) and Subtractions (lines 61-70).

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.

Name and address (Give actual residence. Attach separate sheet if necessary.)	Social Security Number	Official Title	Salary and all Other Compensation Received From Corporation
72. Total (including items on attached sheets)			●

Schedule I - Computation of Premiums

	A Premiums Taxable Under Section 1510	B Premiums Included in Tax Limitation Computation - Section 1505
Life Insurance Companies		
73. Life insurance premiums	●	●
74. Accident and health insurance premiums	●	●
75. Other insurance premiums (attach list)	●	●
76. Total (add lines 73, 74 and 75 - Enter Col. A, line 76 amount on line 6 of Schedule A)		
Nonlife Insurance Companies		
77. Accident and health insurance premiums - (Enter Col. A, line 77 amount on line 7a of Schedule A)		●
78. Other insurance premiums - (Enter Col. A, line 78 amount on line 7b of Schedule A) See instructions, Form CT-33-I before making entries below.		●
Insurance Corporations who receive more than 95% of their premiums from:		
79. Annuity contracts		●
80. Ocean marine insurance		●
81. Group insurance on the elderly (Ins. Law, Section 4236)		●
82. Total (add Column B) - enter at Schedule A, line 9		

Schedule J - Computation of Retaliatory Tax Credit - For Corporations Organized or Domiciled in New York

Do not claim Surcharge Retaliatory Tax Credit on this return.

	Column A 1986	Column B 1987	Column C 1988
83. Tax less credits except for retaliatory tax credit	83		
84. Retaliatory tax credit claimed in 1986 and 1987	84		
85. Balance (subtract line 84 from line 83)	85		
86. 90% of retaliatory taxes paid in 1988 on 1986 premiums and income (total of line 84 plus line 86 may not exceed line 83, Col. A)	86	●	
87. 90% of the retaliatory taxes paid in 1988 on 1987 premiums and income (total of line 84 plus line 87 may not exceed line 83, Col. B)	87	●	
88. 90% of retaliatory taxes paid in 1988 on 1988 premiums and income (total may not exceed line 83, Col. C)	88		●
89. Total retaliatory tax credit claimed this year (add line 86, Col. A, plus line 87, Col. B and line 88, Col. C-see Worksheet on 789 instructions)	89	●	

Schedule K - Computation of Issuer's Allocation Percentage

90. New York gross direct premiums	90	●	
91. Total gross direct premiums	91	●	
92. Issuer's allocation percentage (divide line 90 by line 91 - enter on line 21, Schedule A)	92	●	%

Certification by an Elected Officer 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.

Date	Signature of Officer	Official Title
Date	Signature of Individual or Name of Person Preparing this Return	Preparer's Address