



**CT-33-D**  
(11/94)

**Tax on Premiums Paid or Payable  
To an Unauthorized Insurer**

Tax Law — Article 33-A

|  |       |   |                     |
|--|-------|---|---------------------|
| Employer identification number or social security number |       | Calendar quarter during which the taxable insurance contract (or contracts) took effect or was renewed: |                     |
| Name   |       | Telephone number<br>( )   | For office use only |
| Number and street  |       |   |                     |
| City or town   | State | ZIP code  |                     |

Type of organization

Corporation     
  Partnership     
  Individual     
  Other: \_\_\_\_\_

|  |                  |
|--|------------------|
| <b>A.</b> Payment - pay amount shown on line 10. Make check payable to: <b>Commissioner of Taxation and Finance</b><br>Include on the check your identification number, <i>Form CT-33-D</i> , and the calendar quarter for which you are reporting | Payment enclosed |
|--|------------------|

**Part I — Tax Computation**

|  |    |      |
|--|----|------|
| 1 Premiums paid or payable on risks located entirely within New York State .....   | 1  |      |
| 2 Premiums paid or payable on risks located within and outside New York State from line 13 .....   | 2  |      |
| 3 Total taxable premiums (add lines 1 and 2) .....   | 3  |      |
| 4 Tax rate of 3.6% .....   | 4  | .036 |
| 5 Tax due (multiply line 3 by line 4) .....  | 5  |      |
| 6 Prepayment .....   | 6  |      |
| 7 Balance (if line 5 is greater than line 6, subtract line 6 from line 5) .....  | 7  |      |
| 8 Interest on late payment .....   | 8  |      |
| 9 Additional charges .....   | 9  |      |
| 10 Total payment due (add lines 7, 8 and 9; enter payment here and on line A above) .....  | 10 |      |
| 11 Overpayment (if line 5 is less than line 6, subtract line 5 from line 6) <input type="checkbox"/> Credit to next period <input type="checkbox"/> Refund ..... | 11 |      |

**Part II — Allocation**

|  |    |  |
|--|----|--|
| 12 Premiums paid or payable on risks located within and outside New York State .....   | 12 |  |
| 13 Portion of premiums on line 12 allocated to New York State pursuant to section 9102(b) of the <i>New York State Insurance Law</i> and section 27.2(d) of Title 11 of the <i>Official Compilation of Codes, Rules and Regulations of the State of New York</i> (see instructions regarding allocation: enter here and on line 2; attach computation of allocation) ..... | 13 |  |

**Part III — Insurer Information**

|   |       |                         |
|---|-------|-------------------------|
| Name of insurer who issued the insurance contract |       | Telephone number<br>( ) |
| Number and street                                 |       |                         |
| City or town                                      | State | ZIP code                |

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

|                           |   |   |
|---------------------------|---|---|
| Date                      | Signature of elected officer or authorized person                   | Official title                                |
| Date                      | Print of type name of paid individual or firm preparing this return | Signature of individual preparing this return |
| Paid preparer's ID number | Paid preparer's address   | Telephone number<br>( )                       |

# Instructions

## General Information

The tax under Article 33-A is imposed on any individual, partnership, corporation, society, association, joint-stock company, estate, receiver, trustee, assignee, referee and any other person acting in a fiduciary capacity, who purchases or renews a taxable insurance contract from an insurer not authorized to transact business in New York State under a certificate of authority from the Superintendent of Insurance. The tax rate is 3.6% of premiums paid or payable, less returns thereon, on taxable insurance contracts when the risk is located or resident in New York State, and applies to all contracts purchased or renewed.

A taxable insurance contract includes contracts described in section 1113(a), paragraphs (4) through (14), (16), (17), (19), (20) and (22) of the New York State Insurance Law. This includes the following types of insurance: fire, miscellaneous property, water damage, burglary and theft, glass, boiler and machinery, elevator, animal, collision, personal injury liability, property damage liability, fidelity and surety, motor vehicle and aircraft physical damage, marine and inland marine, credit and residual value insurance. Premiums subject to tax include both (1) 100% of premiums paid or payable to unauthorized insurers when the risk is totally located or resident within New York State and (2) an allocated portion of premiums, paid or payable to unauthorized insurers, when the risk is located or resident both within and without New York State.

## Exemptions

The tax imposed by this article does not apply to:

- any taxable insurance contract procured through a New York licensed excess line broker
- premiums received as consideration for reinsurance contracts
- the government of the United States or any instrumentality thereof
- New York State and its political subdivisions
- the United Nations and any other international organizations of which the United States is a member
- any foreign government
- any taxable insurance contract of the type described under the Insurance Law in section 2117(b), (c) and (d).

## Claim for Refund

File Form CT-8 for a refund if the insurance contract is cancelled prior to the expiration of the insurance period and tax has been paid on the premium.

## Due Date

Any individual, partnership, corporation, etc. subject to Article 33-A is required to file this return within 60 days of the end of the calendar quarter during which the taxable insurance contract took effect or was renewed.

## Specific Instructions

### Part I - Tax Computation

Line 1 - Enter premiums paid or payable to an unauthorized insurer on risks located entirely within New York State.

Line 2 - Enter the allocated portion of premiums paid or payable to an unauthorized insurer on risks located both within and outside New York State. The allocation of premiums will be determined pursuant to the principles used in section 27.2(d) of Title 11 of the *Official Compilation of Codes, Rules and Regulations of the State of New York*. Attach computation of allocation. See Part II - Allocation.

Line 8 - If you do not pay the tax due on or before the due date you must pay interest on the amount of underpayment from the due date to the date paid. You may call the Taxpayer Assistance Bureau for the current rate or to have the interest computed.

Line 9 - Additional charges for late filing and late payment are computed on the amount of tax required to be shown on the return after deduction of any payment made on or before the due date.

- a. If you do not file a return when due, add to the tax 5% per month up to 25% (section 1085(a)(1)(A)).
- b. If you do not file a return within 60 days of the due date, the addition to tax cannot be less than the smaller of \$100 or 100% of the amount required to be shown as tax (section 1085(a)(1)(B)).
- c. If you do not pay the tax shown on a return, add to the tax ½% per month up to 25% (section 1085(a)(2)).
- d. The total of the additional charges in a and c may not exceed 5% for any one month except as provided for in b above (section 1085(a)).

If you think you are not liable for these additional charges, attach a statement to your return explaining reasonable cause for the delay in filing and/or payment (section 1085).

### Part II - Allocation

Line 12 - Enter total amount of premiums on risks located within and without New York State.

Line 13 - A summary of section 27.2(d) shows the allocation for the following types of insurance contracts:

| Insurance Contract   | Allocation Method  |
|--|--|
| Real property .....  | Insured value of structures in New York State  |
| Personal property .....                                      | Insured value of property permanently or principally situated in New York State                            |
| Aircraft or motor vehicle .....                              | Insured value of property permanently located or principally used in New York State                        |
| Fidelity, forgery, bankers blanket and indemnity bonds ..... | Number of insured employees in New York State  |
| Performance and other surety bonds                           | Total bond value of contracts in New York State  |
| Manufacturers and contractors liability .....                | Payroll in New York State  |
| Product liability .....                                      | Number of units manufactured in New York State   |
| Recreational liability .....                                 | Amount of gate receipts in New York State  |
| Aircraft or motor vehicle liability .....                    | Number of aircraft or motor vehicles principally garaged or hangared or principally used in New York State |
| Professional liability .....                                 | Number of insureds in New York State   |
| Environmental Impairment .....                               | Number of units of exposure in New York State  |

Attach a statement showing your allocation. For additional information on allocation see section 27.2(d) of the Official Compilation of Codes, Rules and Regulations of the State of New York or TSB-M-90(9)C.

## Need Help?

**For forms or publications**, call toll free (from New York State only) 1 800 462 8100. From areas outside New York State, call (518) 438-1073.

**For information**, call toll free (from New York State only) 1 800 CALL TAX (1 800 225-5829). From areas outside New York State, call (518) 438-8581.

**Telephone assistance is available from 8:30 a.m. to 4:25 p.m., Monday through Friday.**

**Persons with Disabilities** - In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call the information and assistance numbers listed above.

**Hotline for the Hearing and Speech Impaired** - If you have a hearing or speech impairment and have access to a telecommunications device for the deaf (TDD), you can get answers to your New York State tax questions by calling toll-free (within continental U.S.) 1 800 634-2110. Hours of operation are from 8:30 a.m. to 4:15 p.m., Monday through Friday. If you do not own a TDD, check with independent living centers or community action programs to find out where machines are available for public use.

**If you need to write**, address your letter to: NYS Tax Department, Taxpayer Assistance Bureau, W A Harriman Campus, Albany NY 12227.