



CT-33

New York State Department of Taxation and Finance

Insurance Corporation Franchise Tax Return

Tax Law — Article 33

1997 calendar yr. filers, check box
Other filers enter tax period:

beginning
ending

Employer identification number, File number, Mailing Name and Address, Trade name, Business telephone number, Business activity code number, etc.

Do you do business, employ capital, own or lease property or maintain an office in the Metropolitan Commuter Transportation District? If you answered Yes, you must file Form CT-33-M. (see instructions)

Federal return was filed on: 1120-L, 1120-PC, Consolidated, Other

A. Payment — pay amount shown on line 21. Make check payable to: New York State Corporation Tax

Computation of Tax and Installment Payments of Estimated Tax

Table with 29 rows for tax computation, including lines 1-29 for allocated income, taxes, credits, and balance due.



Taxpayer's name	Employer identification number
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**Schedule D - Computation and Allocation of Business and Investment Capital**

	A Beginning of Year	B End of Year		C Average Fair Market Value Basis
48 Total assets from annual statement ( <i>balance sheet</i> ) . . . . .	●	●	48	●
49 Fair market value adjustment ( <i>attach computation; if negative amount, use parentheses</i> ) . . . . .			49	●
50 Non-admitted assets from annual statement . . . . .			50	●
51 Total assets ( <i>add lines 48, 49, and 50</i> ) . . . . .	●	●	51	●
52 Current liabilities . . . . .			52	●
53 Total capital ( <i>subtract line 52 from line 51</i> ) . . . . .			53	●
54 Subsidiary capital from line 46, column E . . . . .			54	●
55 Business and investment capital ( <i>subtract line 54 from line 53</i> ) . . . . .			55	●
56 Assets, excluding subsidiary assets included on line 54, held as reserves under NYS Insurance Law sections 1303, 1304 and 1305 ( <i>use same method to value assets as on line 51</i> ) . . . . .	Beginning of Year	End of Year	56	●
57 Adjusted business and investment capital ( <i>subtract line 56 from line 55</i> ) . . . . .			57	●
58 Allocated business and investment capital ( <i>multiply line 57 by the allocation percentage from line 45; enter here and on line 2</i> ) . . . . .			58	●

**Schedule E - 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 <small>(Attach separate sheet if necessary)</small>	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					
59 Totals . . . . .					
60 New York adjustment ( <i>subtract column F from column E; enter here and on line 66</i> ) . . . . .					

Use parentheses for negative amounts.

**Schedule F - 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 <small>(Give actual residence. Attach separate sheet if necessary)</small>	B Social Security Number	C Official Title	D Salary and All Other Compensation Received From Corporation
Totals from attached sheet . . . . .			
61 Total ( <i>add column D amounts</i> ) . . . . .			61 ●

**Schedule G - Computation and Allocation of Entire Net Income** (see instructions for explanation of lines 62 through 91)

62	Federal taxable income before net operating loss or operations loss (see instructions) .....	62	●	
<b>Additions</b>				
63	Dividends-received deduction (used to compute line 62) .....	63	●	
64	Dividend or interest income not included in line 62 (attach list) .....	64	●	
65	Interest to stockholders - <input type="text"/> less 10% or \$1,000, whichever is larger .....	65	●	
66	Adjustment for gains or losses on disposition of property acquired prior to January 1, 1974 from line 60 .....	66	●	
67	Deductions attributable to subsidiary capital (attach list) .....	67	●	
68	New York State franchise tax deducted on federal return (attach list) .....	68	●	
69a	Amount deducted on your federal return as a result of a safe harbor lease .....	69a	●	
69b	Amount which would have been required to be included on your federal return except for a safe harbor lease .....	69b	●	
70	ACRS or MACRS deductions used in the computation of federal taxable income (attach Form CT-399) ..	70	●	
<b>Property and casualty insurance adjustments:</b>				
71	Amount deducted from federal gross income on Form 1120-PC, pursuant to IRC section 847(1) .....	71	●	
72	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 (see instructions) .....	72	●	
73	Amount of difference between unpaid losses and discounted unpaid losses at the end of the preceding tax year (attach separate sheet; see instructions) .....	73	●	
74	Other additions (attach explanation on separate sheet) .....	74	●	
75	Total (add lines 62 through 74) .....	75	●	
<b>Subtractions</b>				
76	Interest, dividends, and capital gains from subsidiary capital (attach list) .....	76	●	
77	50% of dividends, from nonsubsidiary corporations (attach list) .....	77	●	
78	Gain on installment sales made prior to January 1, 1974 (attach list) .....	78	●	
79	New York net operating loss or operations loss (attach statement showing computation) .....	79	●	
80a	Amount included on your federal return as a result of a safe harbor lease .....	80a	●	
80b	Amount which could have been deducted on your federal return except for a safe harbor lease .....	80b	●	
81	Depreciation allowed by section 1503(b)(10) (attach Form CT-399) .....	81	●	
<b>Property and casualty insurance adjustments:</b>				
82	Amount included in federal gross income on Form 1120-PC, pursuant to IRC sections 847(5) and 847(6) .....	82	●	
83	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 (see instructions) .....	83	●	
84	Amount of the difference between unpaid losses and discounted unpaid losses at the end of the tax year (attach separate sheet; see instructions) .....	84	●	
85	Reduction in deduction for losses incurred (see instructions) .....	85	●	
86	Other subtractions (attach explanation on separate sheet) .....	86	●	
87	Total subtractions (add lines 76 through 86) .....	87	●	
88	Entire net income (subtract line 87 from line 75) .....	88	●	
89	Addition to entire net income from Form CT-33-ATT, line 7 .....	89	●	
90	Entire net income after adjustment (add lines 88 and 89) .....	90	●	
91	Allocated entire net income (multiply line 90 by line 45; enter here and on line 1) .....	91	●	

Taxpayer's name	Employer identification number
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<b>Schedule H - Computation of Premiums</b>	<b>A Premiums Taxable Under Section 1510</b>	<b>B Premiums Included In Tax Limitation Computation - Section 1505</b>
<b>Life insurance companies</b>		
92 Life insurance premiums.....	92 ●	●
93 Accident and health insurance premiums .....	93 ●	●
94 Other insurance premiums ( <i>attach list</i> ) .....	94 ●	●
95 Total ( <i>add lines 92, 93, and 94, column A; enter here and on line 6</i> ) .....	95	
<b>Nonlife insurance companies</b>		
96 Accident and health insurance premiums ( <i>enter column A amount on line 7</i> )...	96	●
97 Other insurance premiums ( <i>enter column A amount on line 8</i> ) .....	97	●
<b>See instructions before making entries below.</b>		
<b>Insurance corporations who receive more than 95% of their premiums from:</b>		
98 Annuity contracts .....	98	●
99 Ocean marine insurance .....	99	●
100 Group insurance on the elderly (Insurance Law, section 4236) .....	100	●
101 Total ( <i>add lines 92 through 100, column B; enter amount here and on line 10</i> ) .....	101	

**Schedule I — Computation of Retaliatory Tax Credit**

**Part I - Computation of Retaliatory Tax Credit for Corporations Organized or Domiciled in New York (section 1511(c))**  
For tax years prior to 1995 attach separate computation.

	A 1995	B 1996	C 1997
102 Tax less credits (except for retaliatory tax credit) .....	102		
103 Retaliatory tax credit claimed in 1995 and 1996 .....	103		
104 Balance ( <i>subtract line 103 from line 102</i> ) .....	104		
105 90% of retaliatory taxes paid in 1997 on 1995 premiums and income ( <i>total of line 103 plus line 105 may not exceed line 102, column A</i> ) .....	105 ●		
106 90% of the retaliatory taxes paid in 1997 on 1996 premiums and income ( <i>total of line 103 plus line 106 may not exceed line 102, column B</i> ) .....	106 ●		
107 90% of retaliatory taxes paid in 1997 on 1997 premiums and income ( <i>total may not exceed line 102, column C</i> ) .....	107 ●		
108 Total §1511(c) retaliatory tax credit claimed this year ( <i>add line 105, column A, line 106, column B and line 107, column C</i> ) ..	108 ●		

**Part II - Computation of Section 1511(i) Retaliatory Tax Credit for Corporations Organized or Domiciled in New York State  
Relating to Assessments Imposed Pursuant to Public Health Law §2807-t**

109 Amount of assessment paid in 1997 pursuant to Public Health Law §2807-t .....	109 ●	
110 90% of retaliatory taxes paid in 1997 because of 1997 §2807-t assessments ( <i>line 110 cannot exceed line 109</i> ) ...	110 ●	

**Part III - Computation of Total Retaliatory Tax Credits and Carryforward or Refund**

111 Total Retaliatory Tax Credits Claimed this year ( <i>add lines 108 and 110</i> ) .....	111 ●	
112 Retaliatory tax credits carried forward from previous years .....	112 ●	
113 Total retaliatory tax credits ( <i>add lines 111 and 112 and include on line 12</i> ) .....	113 ●	
114 Retaliatory tax credits from lines 108 and 110 used on line 12 to reduce tax due on line 13 to zero ..	114 ●	
115 Balance of retaliatory tax credits ( <i>subtract line 114 from line 113</i> ) .....	115 ●	
116 Retaliatory tax credit to be carried forward ( <i>if you elect this option, enter the amount shown on line 115</i> ) ...	116 ●	
117 Retaliatory tax credit to be refunded ( <i>if you elect this option, enter the amount shown on line 115 here and on line 27</i> )	117 ●	

**Schedule J - Computation of Issuer's Allocation Percentage**

118	New York gross direct premiums .....	118	•	
119	Total gross direct premiums .....	119	•	
120	Issuer's allocation percentage (divide line 118 by line 119; enter here and on line 28) .....	120		%

**Composition of Prepayments on Line 16**

		Date Paid	Amount
121	Mandatory first installment .....	121	
122	CT-400 installments .....	122 (1)	
		(2)	
		(3)	
123	Payment with extension request, Form CT-5, line 5 .....	123	
124	Credit from prior years .....	124	
125	Credit from Form CT-33-M .....	125	Period
126	Total prepayments (add lines 121 through 125; enter here and on line 16) .....	126	

Have you been audited by the Internal Revenue Service in the past 5 years? (if Yes list years.) •  Yes •  No

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

Signature of elected officer or authorized person		Official title	Date
Paid Preparer Use Only	Firm's name (or yours if self-employed)	ID number	Date
	Address	Signature of individual preparing this return	

Mail returns to: **NYS CORPORATION TAX, PROCESSING UNIT, PO 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 from your Annual Statement: Balance Sheet, the Analysis of Assets Exhibit and the Summary by Country portion of Schedule D.

**Need Help?**

**Telephone Assistance** is available from 8:30 a.m. to 4:25 p.m., Monday through Friday. **For business tax information and forms**, call the Business Tax Information Center at 1 800 972-1233. **For general information**, call toll free 1 800 225-5829. **To order forms and publications**, call toll free 1 800 462-8100. **From areas outside the U.S. and Canada**, call (518) 485-6800.

**Fax-on-Demand Forms Ordering System** - Most forms are available by fax 24 hours a day, 7 days a week. Call toll free from the U.S. and Canada 1 800 748-3676. You must use a Touch Tone phone to order by fax. A fax code is used to identify each form.

**Internet Access** - <http://www.tax.state.ny.us> Access our website for forms, publications, and information.

**Hotline for the Hearing and Speech Impaired** - If you 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 from the U.S. and Canada 1 800 634-2110. Assistance is available 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.

**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 numbers listed above.

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