

CT-33-D

New York State Department of Taxation and Finance

Tax on Premiums Paid or Payable To an Unauthorized Insurer

| | Amended return | Tax Law — Artic | le 33-A | | | |
|---------------------------|---|--------------------------|----------------------------------|------------------|----------------|--------------------|
| Emp | loyer identification number or social security number | er of insured | Term of insura | nce policy effec | tive or renewe | ed |
| | | | from | | to | |
| | | | | mm/dd/yy | | mm/dd/yy |
| Nam | e of insured | Telephone nun | nber | For Tax Departme | ent use only | |
| | | | () | | | |
| Num | ber and street or PO box | | | | | |
| | | | | | | |
| City | State | | ZIP code | | | |
| | | | | | | |
| Type | of organization (mark an X in one box) | | | | | |
| | Corporation Partnership | Individual | 0 | ther: | | |
| | | | | | | Payment enclosed |
| | ay amount shown on line 10. Make check payable on check your identification number, Form CT-33-D | | | | A. • | -ayment enclosed |
| | I — Tax computation | y and the balondar quan | tor for writeri you are | roporting. | 7.1 | |
| | Premiums paid or payable on risks located e | antirely within New \ | Vork State | | 1. | |
| | Premiums paid or payable on risks located within and or | • | | | 1. | |
| | Allocated portion of premiums from line 2a (| _ | <u> </u> | | ■ 2b. | |
| | | , | | | | |
| 4 | Tax rate of 3.6% | | | | | 0.036 |
| 5 | Tax due (multiply line 3 by line 4) | | | | 5. | 0.000 |
| 6 | | | | | - | |
| | Balance (if line 5 is greater than line 6, subtract I | | | | | |
| | Interest on late payment | | | | 8. | |
| 9 | Penalties | | | | 9. | |
| 10 | 0 Total payment due (add lines 7, 8, and 9; enter payment here and on line A above) | | | | | |
| 11 | Overpayment (if line 5 is less than line 6, subtract line 5 from line 6) Credit to next period Refund 11. | | | | | |
| | | | | | | |
| Part | II — Insurer information (attach addition | nal sheets if necessar | y) | | | |
| Name | of insurance company | Broker's name | | Broker's | telephone numb | er |
| | | | | (|) | |
| Numb | er and street or PO box of insurance company | | | | | |
| | | | | | | |
| City | | | State | | | ZIP code |
| | | | | | | |
| | ification. I certify that this return and any atta | chments are to the be | est of my knowled Official title | ge and belief | | , and complete. |
| Signa | ature of authorized person | | Οπισιαι τιτιε | | | Date |
| <u> </u> | Cignostrus of individual proportion the control | Firm's na / " | W | | T-1! | ana numbar |
| arer | Signature of individual preparing this return | Firm's name (or yours if | seir-empioyed) | | lelepho | one number \(\) |
| prep e on | Address Cit | tv State | ZIP code II | O number | | Date Date |
| Paid preparer use only | Audiess Oll | ly State | ZIF COUR | o number | | Date |
| | | | | | | |

Private delivery services — If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to file your return and pay tax. However, if, at a later date, you need to establish the date you filed your return or paid your tax, you cannot use the date recorded by a private delivery service **unless** you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, *Designated Private Delivery Services*. See *Need help?* on the back of this form for information on ordering forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your return, contact that private delivery service for instructions on how to obtain written proof of the date your return was given to the delivery service for delivery. If you use **any** private delivery service, whether it is a designated service or not, address your return to: State Processing Center, 431C Broadway, Albany NY 12204-4836.

If you use the **U.S. Postal Service** mail your return to:

NYS CORPORATION TAX PROCESSING UNIT PO BOX 22038 ALBANY NY 12201-2038

Instructions

Up-to-date information affecting your 2004 tax return

Visit the Corporation Tax Up-to-Date Information page on our Web site at www.nystax.gov for Tax Law changes or forms corrections that occurred after the forms and instructions were printed.

General information

The tax under Article 33-A is imposed on any individual, partnership, corporation, limited liability company, 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, minus 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 located or resident entirely 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 outside New York State.

Exemptions

The tax imposed by Article 33-A 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).
- Federal long-term care insurance described under Title 5, Chapter 90, of the United States Code.

Claim for refund

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

Due date

File this return within 60 days of the end of the calendar guarter during which the taxable insurance contract took effect or was renewed.

Line instructions

Whole dollar amounts — You may elect to show amounts in whole dollars rather than in dollars and cents. Round any amount from 50 cents through 99 cents to the next higher dollar. Round any amount less than 50 cents to the next lower dollar.

Negative amounts — Show any negative amounts with a minus (-) sign.

Part I — Tax computation

Line 1 — Enter premiums paid or payable to an unauthorized insurer on risks located entirely within New York State. Enter 0 if all premiums are on risks located both within and outside New York State.

Line 2a — Enter total amount of premiums on risks located both within and outside New York State. Enter 0 on both lines 2a and 2b if all premiums were on risk located entirely within New York State and were included on line 1.

Line 2b — Enter the allocated portion of premiums from line 2a. These are the premiums allocated to New York State from risks located both within and outside New York State.

To determine the allocated portion of premiums from risk located both within and outside New York State and for additional information on allocation, see TSB-M-90(9)C or the Official Compilation of Codes, Rules and Regulations of the State of New York, Title 11, Part 27, section 27.9 and Appendix 4. Attach a statement showing the computation of your allocation.

Some of the insurance contract allocations are shown below; for a complete list, see Appendix 4. Allocation by a different method may be acceptable (for example, product liability insurance may be allocated by receipts from sales of the product in New York State).

| 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 |
| 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 |

Line 8 — If you do not pay the tax due on or before the original due date (without regard to any extension of time for filing), you must pay interest on the amount of underpayment from the original due date to the date paid.

Line 9 — Compute charges (penalties) for late filing and late payment of tax required to be shown on the return, after deduction of any payment made on or before the due date (with regard to any extension of time for filing).

- 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 in item A above 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 items A and C above may not exceed 5% for any one month except as provided for in item 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, payment, or both (section 1085).

Note: You may compute your penalty and interest by accessing our Web site at www.nystax.gov and clicking on Electronic Services, or you may call 1 800 972-1233, and we will compute the penalty and interest for you.

Need help?

Internet access: www.nystax.gov (for information, forms, and publications)

Fax-on-demand forms: 1 800 748-3676

Business Tax Information Center: 1 800 972-1233 From areas outside the U.S. and outside Canada: (518) 485-6800

Hearing and speech impaired (telecommunications device for the deaf (TDD) callers only):

1 800 634-2110