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New York State Department of Taxation and Finance Subsidiary Detail Spreadsheet Attachment to Form CT-33-A

Life Insurance Corporation Combined Franchise Tax Return

Combined parent corporation name	Parent employer identification number

If there is **only one subsidiary** included in the combined return, this form **is not required**.

If there is more than one subsidiary included in the combined return, this form is required.

Attach all CT-33-A/B forms to Form CT-33-A, Life Insurance Corporation Combined Franchise Tax Return.

For all combined returns and attachments, the corporation responsible for filing Form CT-33-A is designated the parent. The other corporations included in the combined return are designated subsidiaries.

		Subsidiary	Subsidiary
		EIN	• EIN
	•	•	
		Name	Name
Sche	edule A — Computation of allocation percentage (see instructions)		
34	New York taxable premiums)	
35	New York ocean marine premiums		
36	New York premiums for annuity contracts and for insurance for the elderly •)	
37	New York premiums on reinsurance assumed)	
38	Total New York gross premiums (add lines 34 through 37)		
39	New York premiums ceded that are included on line 38		
40	Total New York premiums (subtract line 39 from line 38))	•
41	Total everywhere premiums		•
42	New York premium percentage (divide line 40 by line 41)		%
43	Weighted New York premium percentage (multiply line 42 by nine)		%
	New York wages, salaries, personal service compensation, and		•
	commissions	,	
45	Total everywhere wages, salaries, personal service compensation, and		•
	commissions)	
46	New York payroll percentage (divide line 44 by line 45)		%
	Total New York percentages (add lines 43 and 46)		%
	Allocation percentage (Divide line 47 by ten; if line 42 or 46 is zero, see instructions.)		%
	edule B — Computation of subsidiary capital (see instructions)		
49	Average fair market value of subsidiary capital		
50	Average value of current liabilities attributable to subsidiary capital)	•
51	Net average fair market value of subsidiary capital		•
	Net average value of subsidiary capital allocated to New York State		•
	edule C — Computation of business and investment capital (see inst	· · · · · · · · · · · · · · · · · · ·	
	Average value of total assets from annual statement		•
54	Average fair market value adjustment)	•
55	Average value of nonadmitted assets from annual statement)	
56	Total assets (add lines 53, 54, and 55 in Total column)		
57	Average value of current liabilities		
58	Total capital (subtract line 57 from line 56 in Total column)		
59	Subsidiary capital from line 51, Total column		
60	Business and investment capital (subtract line 59 from line 58 in Total column)		
61	Average value of assets, excluding subsidiary assets included on line 51,		
	held as reserves under New York State Insurance Law sections 1303,		
	1304, and 1305	,	
62	Adjusted business and investment capital (subtract line 61 from line 60 in Total column)		

Who must file this form

Parent corporations who file a combined return that includes more than one subsidiary must use Form CT-33-A/B to detail the subsidiaries' individual computations. Each Form CT-33-A/B may accommodate six subsidiaries. Use as many additional Form CT-33-A/Bs as necessary. The parent corporation should complete the *Parent* column on Form CT-33-A and should not be included on Form CT-33-A/B.

Instructions

Line numbers and text for Form CT-33-A/B correspond to the line numbers of Form CT-33-A, *Life Insurance Corporation Combined Franchise Tax Return*. Note that certain lines are not included on Form CT-33-A/B because subsidiary information is not required for these lines. For line instructions, refer to the corresponding line instructions in Form CT-33-A-I, *Instructions for Forms CT-33-A, CT-33-A/ATT, and CT-33-A/B*.

Enter the amounts shown in the Total column on the corresponding line on Form CT-33-A, column B (Total subsidiaries).

EIN		Subsidiary	Subsidiary	Subsidiary	Subsidiary	
Name	EIN					
Name	•					Total
34.	Nam	ne Na	me Nar	me I	Name	iotai
34.						
34.	Schedul	le A — Computation	of allocation percenta	age		
35.						34.
36.	35.	•	•			
37.		•	•			
38. 9 39. 9 40. 9 40. 40. 41. 9 40. 41. 9 41. 42. 43. 96 96 96 96 96 96 96 96 96 96 96 96 96		•	•			
39.			•			
40. 41. 40. 41. 42. 76. 76. 76. 76. 42. 43. 76. 76. 76. 45. 45. 45. 45. 46. 47. 76.	39.	•	•			
41. 42.		•	•			40.
42.	41.					41.
43.		%	%	%	%	42.
44.		%	%	%		
45. 46. 96 96 96 47. 48. 48. 97 98 98 98 98 98 98 98	•	•	•			
45. 46. 96 96 96 47. 48. 48. 47. 96 96 96 96 49. 48. 48. 49. 49. 49. 49. 49. 49. 49. 50. 51. 52. 51. 52. 51. 52. 51. 52. 55. 56. 55. 56. 57. 58. 59. 60. 61. 6	44.					44.
46.	•	•	•			
46.	45.					45.
47.		%	%	%	%	
48.						
Schedule B — Computation of subsidiary capital 49.	48.					
49. • • • • • • • • • • • • • • • • • • •	Schedul	le B — Computation		<u>'</u>		
51.	49.	•	•			49.
51.	50. •	•	•			
52. • • 52. Schedule C — Computation of business and investment capital 53. • • 53. 54. • • 54. 55. • • 55. 56. 56. 57. 58. 59. 60. 61. 61. 61.	51. °	•	•			51.
Schedule C — Computation of business and investment capital 53.	52. •	•	•			52.
54. • 54. 55. • 55. 56. 56. 57. • • 57. 58. 58. 59. 60. 60. 60. 61. 61.	Schedul	le C — Computation	of business and inves	stment capital		
55. • • • • 55. 56. 56. 57. • • • 58. 59. 60. 60. 60.	53. •		•			53.
56.	54. •		•			54.
57. • • • 57. 58. 58. 59. 60. 61. • • 61.	55. •	•	•			55.
58. 59. 60. • • • • • • • • • • • • • • • • • • •	56.					56.
59. 60. 60. 61.	57. •		•			57.
59. 60. 60. 61.	58.					58.
61.						59.
61.						
			•			
	61.					61.
62.	62.					62.

Nam	е		Employer identification	number	
			Subsidiary		Subsidiary
		EIN	Cascialary	EIN	Cabolalary
		Nam	ne	Name	•
Sch	edule D — Computation of entire net income (see instructions)				
64	Federal taxable income before operations loss or net operating loss (NOL) (see instructions)			•	
Addi					
	Dividends-received deduction (used to compute line 64)				
	Dividend or interest income not included in line 64 (attach list)	<u> </u>			
67	Interest to stockholders: minus 10% or \$1,000, whichever is larger				
68	Adjustment for gains or losses on disposition of property acquired				
	before January 1, 1974 (from Form CT-33-A/ATT, Schedule D, line 10)				
69	Deductions attributable to subsidiary capital (attach list; see instructions)			•	
70	New York State franchise tax deducted on federal return (attach list)				
71	Amount deducted on your federal return as a result of a safe harbor lease •				
72	Amount that would have been required to be included on your federal				
	return except for a safe harbor lease				
73	Total amount of federal depreciation from Form CT-399				
	(see instructions)				
74	Other additions (attach explanation on separate sheet; see instructions)				
75	Total (add lines 64 through 74 in Total column)				
	ractions				
76	Interest, dividends, and capital gains from subsidiary capital (attach list; see			•	
	instructions)				
				•	
77	Fifty percent of certain dividends (attach list; see instructions)				
	Gain on installment sales made before January 1, 1974 (attach list)			•	
80	Amount included on your federal return as a result of a safe harbor lease •				
	Amount that could have been deducted on your federal return except			•	
	for a safe harbor lease				
82	Total amount of allowable New York depreciation under Article 33,			•	
	section 1503(b), from Form CT-399 (see instructions)				
83	Other subtractions (attach explanation on separate sheet; see instructions)	1		•	
Scho	edule E — Computation of alternative base				
	Officer salaries and other compensation (from Form CT-33-A/ATT, Schedule E,				
31	line 11)				
	,				

Subsidia	y Subsidiary	Subsidiary	Subsidiary	
EIN	EIN	EIN	EIN	
				Total
Name	Name	Name	Name	
hedule D — Co	omputation of entire net	income		
•	•	•	•	
4.				64.
ditions	1 11			
5. •		•	•	65.
6. •				66.
•				
7.				67.
8.				68.
9. •				69.
0.				70.
1. •		<u> </u>		71.
2.				72.
ا ا				72
3. 4. •	•	•	•	73. 74.
5.				75.
ıbtractions				13.
•	•		•	
6.				76.
•	•	•	•	
7.				77.
B. •	•	•	•	78.
D. •				80.
•				
1.				81.
•	•		•	
2.				82.
3.	•		•	83.
chedule E — Co	mputation of alternativ	e base		
7.				87.

Name	Employer identification number		
	Subsidiary	Subsidiary	
	EIN	EIN	
	Name	Name	
Schedule F — Computation of premiums (see instructions)			
Life insurance company premiums taxable under section 1510			
93 Life insurance premiums	•		
94 Accident and health insurance premiums	•		
95 Other insurance premiums (attach list)	•		
96 Total life insurance company premiums (add lines 93 through 95)	•	•	
Life insurance company premiums included in the tax limitations cor	mputed		
under section 1505			
97 Life insurance premiums	•	•	
98 Accident and health insurance premiums	•	•	
99 Other insurance premiums			
100 Total life insurance company premiums subject to the floor limitation tax under section 1505(b) (add lines 97 through 99)			
Insurance corporations who receive more than 95% of their premium	s from:		
101 Annuity contracts, ocean marine insurance, and group insurance on the elderly (see instructions)	•		
102 Total life insurance company premiums subject to the limitation on to under section 1505(a)(2) (add lines 100 and 101)		•	
Schedule G — Computation of issuer's allocation percentage	(see instructions)		
103 New York gross direct premiums	•	•	
104 Total gross direct premiums			

Subsidiary	Subsidiary	Subsidiary	Subsidiary	
EIN	EIN	EIN	EIN	
				Total
Name	Name	Name	Name	
	utation of premiums			
	y premiums taxable und	der section 1510	1 1-1	
)3. •	•	•	•	93.
)4. °		•	•	94.
)5. <mark>•</mark>	•	•	•	95.
06. ●				96.
fe insurance compar	y premiums included in	the tax limitations cor	nputed	
under section 1505			•	
)7. •	•			97.
)8. •	•	•	•	98.
9.	•	•	•	99.
00.				100.
surance corporations	s who receive more than	n 95% of their premium	s from:	
o1.				101.
•				
02.				102.
-				
chedule G — Comr	outation of issuer's all	ocation percentage		
03.	•	•	•	103.
04.	•	•	•	104.