

## New York State Department of Taxation and Finance

# Insurance Corporation Franchise Tax Return Tax Law - Article 33

2000 calendar-yr. filers, check box: Other filers enter tax period:

beginning	
andina	

	Tax Law - Article 33			enung	
Employ	er identification number	File number	Check box if overpayment claimed	For office use o	only
	Legal name of corporation	Trade name/DBA			
		Trace Trainio/DDA		Date received	
Mailing name and address	Mailing name (if different from legal name) and address		State or country of incorporation		
nai Ire	c/o		and the state of t		
ng adc	Number and street or PO box		Date of incorporation		
aiii pu			'		
ĭ ĕ	City State	ZIP code	Foreign corporations; date began		
			business in NYS	Audit use	
	ss above is new, If your name, employer identification number, address, or owner/officer info		lephone number		
instruc	` ¬ I'				
NAIC	S business code number (see instructions) Principal business activity				
Are v	ou a member of a NYS combined group?	No If <i>Yes</i> , enter pare	OHOOK DOX	if you are	a life
				company.	
	u do business, employ capital, own or lease property, or maintal	in an office in the Metrop	olitan Commuter Transporta	ation	Yes No
	t? If Yes, you must file Form CT-33-M (see instructions).	. 🗆 🗅 🗀			L Yes L No
	al return was filed on: • ☐ 1120-L • ☐ 1120-PC	Consolidated			Doumont or slessed
	ayment – pay amount shown on line 21. Make check pay Attach your payment here.	able to: <b>New York St</b>	ate Corporation Tax	L	Payment enclosed
_	putation of tax and installment payments of estima	ated tax			
	Allocated entire net income from line 89		× (see instructions	) 1 •	
	Allocated business and investment capital from line 58.		× .0016	2 •	
	Alternative tax (attach computation)		× .09	3 •	
4	Minimum tax	_		. 4	250 00
5	Allocated subsidiary capital from line 47		× .0008	5 •	253 66
	Life insurance company premiums from line 93, column		× .007	6 •	
	Accident and health insurance premiums, received by n				
	insurance companies, from line 94, column A		× .01	7 •	
8	Other nonlife insurance company premiums from line 95, colu		× .013	8 •	
9	Total (add line 1, 2, 3, or 4, whichever is largest, and lines 5 th	nrough 8)		. 9 •	
10a	Limitation on life insurance companies; use amount from line	99	× .02	10a ●	
	Limitation on nonlife insurance companies; use amount from li		× (see instructions		
	Tax — Amount from line 9, 10a, or 10b, whichever is les	•	ming EZ or ZEA credit)	. 11 •	
12	Tax credits — ■ Taxes on certain fire insurance premiu	ums (enter amount)		<b>⅃</b> ┃ ┃	
	<del>-</del>	■ Retaliatory tax	● □ CT-43		
	● ☐ CT-41 ● ☐ CAPCO credit (attach forms; see in	•	*	12	
13	Tax due (subtract line 12 from line 11; if less than zero, enter	"0")		. 13	
	First installment of estimated tax for next period:	OT 5 !!			
	If you filed a request for extension, enter amount from F				
	If you did not file Form CT-5 and line 13 is over \$1,000,		,		
15 16	Total (add line 13 and line 14a or 14b)  Total prepayments from line 130				
16 17	Balance (if line 16 is less than line 15, subtract line 16 from line				
18	Penalty for underpayment of estimated tax (check box if I				
19	Interest on late payment (see instructions)				
20	Late filing and late payment penalties (see instructions)				
21	Balance due (add lines 17 through 20; enter payment on line				
22	Overpayment (if line 15 is less than line 16, subtract line 15 f.				
	Amount of overpayment to be credited to next period				
24	Balance of overpayment (subtract line 23 from line 22)				
	Amount of overpayment to be credited to CT-33-M				
	Refund of overpayment (subtract line 25 from line 24)				
27	Refund of excess retaliatory tax credit from line 121				
28	Issuer's allocation percentage from line 124				%
	Reinsurance allocation percentage from line 39				%

Schedule A — Allocation of reinsurance premiums when location of risks cannot be determined (see instructions) (attach separate sheet if necessary) В С Reinsurance premiums Name of ceding company Reinsurance premiums Reinsurance allocated to New York State received allocation % (column B x column C) Totals from attached sheet ..... 30 Total (add column D amounts; enter here and include on line 34) Schedule B — Computation of allocation percentage (If you do not claim an allocation, enter "100" on line 45. For explanation of lines 31 through 45, see page 3 of instructions.) 31 New York taxable premiums ...... 31 ● 32 New York ocean marine premiums..... 32 ● 33 New York premiums for annuity contracts and for insurance for the elderly ...... 33 34 New York premiums on reinsurance assumed from authorized companies ...... 35 Total New York gross premiums (add lines 31 through 34) ..... 36 New York premiums ceded that are included on line 35 ..... 36 New York premium percentage (divide line 37 by line 38; enter here and on line 29) 40 Weighted New York premium percentage (multiply line 39 by nine) % 41 New York wages, salaries, personal service compensation, and commissions... 41 42 Total wages, salaries, personal service compensation, and commissions ........ 42 | ● New York payroll percentage (divide line 41 by line 42) 43 44 Total New York percentages (add lines 40 and 43) ...... 45 Allocation percentage (Divide line 44 by ten. If line 39 or 43 is zero, see instructions, page 3, Schedule B.) ............. 45 ● Schedule C —Computation and allocation of subsidiary capital (attach separate sheet if necessary) C Ε F D G Description of subsidiary capital Current Net average liabilities Employer % of voting Issuer's Average Value allocated fair market attributable to List each corporation identification stock fair market allocation to New York State value subsidiary number owned value (col. C - col. D) (col. E x col. F) capital Totals from attached sheet ..... **46** Totals (add amounts in columns C, D, and E) .....

47 Allocated subsidiary capital (add column G amounts; enter here and on line 5)

Taxpayer's name	Employer identification number
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Schedule D — Comp	utation and a	allocation o	of business	and investment	capital
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		A Beginning of year	B End of year		C Average fair market value basis
48	Total assets from annual statement (balance sheet)	•	•	48	•
49	Fair market value adjustment (attach computation; if negative amount, use parentheses)			49	•
50	Non-admitted assets from annual statement			50	•
51	Total assets (add lines 48, 49, and 50)	•	•	51	•
52	Current liabilities			52	•
53	Total capital (subtract line 52 from line 51)			53	•
54	Subsidiary capital from line 46, column E			54	
55	Business and investment capital (subtract line 54 from lin	ne 53)		55	•
56	Assets, excluding subsidiary assets included on line 54, held as reserves under New York State Insurance Law sections 1303, 1304, and 1305 (use same method to value assets as on line 51)	Beginning of year	End of year	56	•
57	Adjusted business and investment capital (subtract line	56 from line 55)		57	•
58	Allocated business and investment capital (multiply line from line 45; enter here and on line 2)		=	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.)

Α	В	C Fair market	D	E	F
Description of property (attach separate sheet if necessary)	Cost	price or value on Jan. 1, 1974	Value realized on disposition	New York gain (loss)	Federal gain (loss)
otals from attached sheet					
<b>59</b> Totals					
<b>60</b> New York adjustment (subtractive use parentheses for negative	ct line 59, column F fr	rom line 59, column E; enter	here and on line 66;		

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	В	С	D Salary and all other
(give actual residence; attach separate sheet if necessary)	Social security number	Official title	compensation received from corporation
Totals from attached sheet			
61 Totals (add column D amounts)			61 ●

Sch	edule G – Computation and allocation of entire net income (see inst	truct	ions for explana	tion of lines	62 through	86)
62	Federal taxable income before net operating loss or operations loss (see instru	uctio	ns)	62	•	
	tions					
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: less 10% or \$1,000, whichever is less 10% or \$1,000, which	arge	r	65	•	
66	Adjustment for gains or losses on disposition of property acquired					
	before 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	•	
	Amount deducted on your federal return as a result of a safe harbor lease				•	
69b	Amount which would have been required to be included on your federal return excep	ot for	a safe harbor lea	se <b>69b</b>	•	
70	ACRS or MACRS deductions used in the computation of federal taxable income	e (se	e instructions)	70	•	
	Property and casualty insurance adjustments:					
	Amount deducted from federal gross income on Form 1120-PC, under IRC s			71	•	
72	Unearned premiums at the end of the preceding tax year excluded from prer					
	result of the reduction in the deduction for unearned premiums (see instruc			72	•	
73	Amount of difference between unpaid losses and discounted unpaid losses a					
	preceding tax year (attach separate sheet; see instructions)					
	Other additions (attach explanation on separate sheet)					
75	Total (add lines 62 through 74)			75	•	
	Subtractions				П	
76	Interest, dividends, and capital gains from subsidiary capital (attach list)					
77	, , ,					
	Gain on installment sales made before January 1, 1974 (attach list)					
	New York net operating loss or operations loss (attach statement showing comp					
	Amount included on your federal return as a result of a safe harbor lease					
	Amount which could have been deducted on your federal return except for a					
81	Depreciation allowed by section 1503(b)(10) (see instructions)	•••••		81	•	
	Property and casualty insurance adjustments:					
	Amount included in federal gross income on Form 1120-PC, under IRC sections and the section of t			(6) <b>82</b>	•	
83	Unearned premiums at the end of the tax year included in premiums earned					
	of the reduction in the deduction for unearned premiums (see instructions)			83	•	
84	Amount of the difference between unpaid losses and discounted unpaid loss					
0.5	of the tax year (attach separate sheet; see instructions)					
	Reduction in deduction for losses incurred (see instructions)					
	Other subtractions (attach explanation on separate sheet)			86		
	Total subtractions (add lines 76 through 86)					
	Entire net income (subtract line 87 from line 75)					
09	Allocated entire net income (multiply line 88 by line 45; enter here and on line 1)			53		
Soh	edule H — Computation of premiums		Α			В
	Saute II Computation of premiums		Premium taxable un section 15	der	in tax	ms included : limitation า — section 1505
Life i	nsurance companies		55511011 10	•	25patatio	
	Life insurance premiums	90	•		•	
	Accident and health insurance premiums	91			•	
	Other insurance premiums (attach list)	92	•		•	
	Total (add lines 90, 91, and 92, column A; enter here and on line 6)	93				
	ife insurance companies					
	Accident and health insurance premiums (enter column A amount on line 7)	94	•		•	
	Other insurance premiums (enter column A amount on line 8)	95			•	
See	instructions before making entries below.					
	rance corporations who receive more than 95% of their premiums from:					
	Annuity contracts			96	•	
97	Ocean marine insurance			97	•	
98	Group insurance on the elderly (Insurance Law, section 4236)			98	•	
99	Total (add lines 90 through 98, column B; enter amount here and on line 10a or line 10b,	, whi	chever is applicable	e) <b>99</b>		

Taxpayer's name	Employer identification number

#### Schedule I — Computation of retaliatory tax credit

### Part 1 —Computation of retaliatory tax credit for corporations organized or domiciled in New York State (section 1511(c))

For tax years before 1998, attach separate computa	tion. A 1998		B 1999	C 2000
<b>100</b> Tax less credits (except for retaliatory tax credit)	100			
<b>101</b> Retaliatory tax credit claimed in 1998 and 1999	101			
<b>102</b> Balance (subtract line 101 from line 100)	102			
103 90% of retaliatory taxes paid in 2000 on 1998 premiums and income (total of line 101 plus	403.4			
line 103 may not exceed line 100, column A)				
104 90% of the retaliatory taxes paid in 2000 on 1999 princome (total of line 101 plus line 104 may not exceed		104		
105 90% of retaliatory taxes paid in 2000 on 2000 prem	niums and income (total	al may not exceed line 10	0, column C) 105	5 •
106 Total section 1511(c) retaliatory tax credit claimed		· ·		

## Part 2 — Computation of section 1511(i) retaliatory tax credit for corporation organized or domiciled in New York State relating to assessments imposed under Public Health Law section 2807-t

Fa. 4	ay yaara bafara 1000 attaab aanarata aammuta	41.00	Α		В		С	
ror t	For tax years before 1998, attach separate computation		1998		1999		2000	
107	Amount of assessment paid under							
	Public Health Law section 2807-t	107						
108	Tax less credits (except for section 1511(i)							
	retaliatory credit)	108						
109	Section 1511(i) retaliatory credit previously claimed in 1998 and 1999	109						
110	Balance (subtract line 109 from line 108)	110						
111	90% of retaliatory taxes paid to other states in 2000 because of 1998 2807-t assessments (may not exceed lower of line 107 or line 110, column A)	111						
112	90% of retaliatory taxes paid to other states in 20	00 be	ecause of 1999		<u> </u>	/////		
	2807-t assessments (may not exceed lower of line	107 c	or line 110, column B)	112	•			
113	90% of retaliatory taxes paid to other states in 20 exceed lower of line 107 or line 110, column C)				, ,	113	•	
114	Section 1511(i) retaliatory tax credit claimed this y	ear /	(add lines 111A, 112B, an	nd 113	3C)	114	•	

#### Part 3 — Computation of total retaliatory tax credits and carryforward or refund

115	Total retaliatory tax credits claimed this year (add lines 106 and 114)	115	:	
	·			
116	Retaliatory tax credits carried forward from previous years	116	•	1
117	Total retaliatory tax credits (add lines 115 and 116 and include on line 12)	117	•	
118	Retaliatory tax credits from lines 106 and 114 used on line 12 to reduce tax due on line 13 to zero	118	•	
119	Balance of retaliatory tax credits (subtract line 118 from line 117)	119	•	
120	Retaliatory tax credit to be carried forward (if you elect this option, enter the amount shown on line 119)	120	•	
121	Retaliatory tax credit to be refunded (if you elect this option, enter the amount shown on line 119 here and on line 27)	121	•	

#### Schedule J — Computation of issuer's allocation percentage

122	New York gross direct premiums	122	•	
123	Total gross direct premiums	123	•	
124	Issuer's allocation percentage (divide line 122 by line 123; enter here and on line 28)	124		%

	()						
Sche	dule K — Composition of prepayments						
			Date pa	aid		Amou	nt
125	Mandatory first installment						
126a	Second installment						
126b	Third installment						
126c	Fourth installment						
127	Payment with extension request, from Form CT-5, line 5		127				
128					128	3	
129	Posted.					)	
130						)	
Sche	dule L — Computation of CAPCO credit allowed, credit carry	over, ar	nd credit recapt	ure			
131	Enter the amount of CAPCO credit allocated by the Superintendent of Insurance for the current tax year					•	
132	Credit limitation (10% per year)			13	32		.10
133	133 Credit allowed for current tax year (multiply line 131 by line 132)					•	
134	34 Unused CAPCO credit from previous tax years					•	
135	Total CAPCO credit available in current tax year (add lines 133 and 134)	)		13	35		
136a	Tax after application of all other credits listed on line 12	136a					
136b	Minimum tax	136b	2	50 00			
136c	Tax against which credit may be applied (subtract line 136b from						
	line 136a; if line 136b is greater than line 136a, enter "0")	136c					
137	CAPCO credit used to reduce tax in current year (enter line 135 or line 136c amount, whichever is less;						
	,					•	
138	38 Unused CAPCO credit available (subtract line 137 from line 135)						
139	- · · · · · · · · · · · · · · · · · · ·					•	
140	Net CAPCO credit available for carry forward (subtract line 139 from line	138; see i	instructions)	14	40 <b>•</b>	<u> </u>	
	ve you been audited by the Internal Revenue Service in the past 5 year f Yes, list years:	rs? •	Yes ●	] No			
Certif	ication. I certify that this return and any attachments are to the best of	my knowl	edge and belief tr	ue, corre	ect,	and complete.	
Signati	ure of elected officer or authorized person	Official title			ı	Date	
sparer inly	irm'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 22038, ALBANY NY 12201-2038 Also mail a copy to: The State Insurance Fund, Agency Building 1, Empire State Plaza, Albany NY 12257

#### Private delivery services

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to file your return. However, if, at a later date, you need to establish the date you filed your return, 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 page 6 of the instructions for information on ordering forms and publications.) 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.

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.