

**Foreign Life Insurance Companies
Statement of Fees, Premium Taxes and Other Obligations
Calendar 2014**

NAVIGATION LINKS

- [Filing Instructions](#)
- [Tax Forms Instructions](#)
- [Tax Forms Index](#)

Company:

Domicile: NAIC #:

FEES AND OTHER OBLIGATIONS		INCORPORATION BASIS	OHIO BASIS
1.	Filing copy of Charter of Incorporation (New Licensees Only)	0.00	0.00
2.	Filing Annual Statement	0.00	175.00
3.	Certificate of Authority	0.00	175.00
4.	Line 4 is no longer used.		
Number of New Appointments used for Line 5:		0	0
5.	Agent / Agency New Appointment Fees (per Appointment) Fee Basis: \$	0.00	0 @ \$15 and 0 @ \$20 0.00
Number of Renewal Appointments used for Line 6:		0	0
6.	Renewal Agent / Agency Fees (per Renewal) Fee Basis: \$	0.00	0 @ \$15 and 0 @ \$20 0.00
Other fees charged on State of Incorporation Basis (Describe*) (b):			
7a.	Required Input	0.00	
7b.		0.00	
7c.		0.00	
7d.			
8.	Taxes based upon income (Attach CT-33, IL-1120, etc.)* (b)	0.00	
9.	Taxes assessed by municipalities (Attach CT-33M, KY, AL, etc.)* (b)	0.00	
10.	Total Fees & Other Obligations	0.00	350.00

Line 10 (Ohio Basis) should agree with all invoices for the above fees (lines 1 through 6) received from invoiced by the Ohio Department of Insurance, in this calendar year, regardless of whether or not the account was paid. The reason for using the above Ohio fees is solely for the purpose of computing the basis for retaliatory taxes.

PREMIUM TAX		INCORPORATION BASIS	OHIO BASIS
11.	Life insurance premiums	0.00	0.00
12.	Annuity considerations	0.00	
13.	Accident & Health insurance premiums	0.00	0.00
14.	Additional taxable amounts.* (b) Describe: Required Input	0.00	0.00
15.	Totals	0.00	0.00
16.	Less: Dividends to policyholders* (a)	0.00	0.00
17.	Less: Any Life premiums not taxed under incorporations basis* (b) Describe: Required Input	0.00	
18.	Less: Any A&H premiums not taxed on incorp. basis and/or Ohio basis* (b)	0.00	0.00
19.	Less: Any Annuities not taxed under incorporation basis	0.00	
20.	Total Net Taxable Premiumn & Annuities	0.00	0.00
State of Incorporation Tax:			
	Life tax rate @ 0%	0.00	
	A & H tax rate @ 0%	0.00	
	Annuity tax rate @ 0%	0.00	
21.	Total Tax (Ohio's Tax rate for Life and A&H business is @ 1.4%)* (c)	0.00	0.00

NOTE:

- a. The only dividend permitted on Ohio's basis is Line 6.3, Column 5 of the Annual Statement State Page. Do not deduct unless included in LINE b.
- b. Documentation must be attached electronically prior to submission of this tax return. Click the "Attach Documents" option which is located next to the SUBMIT button, attaching one file at a time.
- c. Insert Incorporation Basis premium tax. Attach schedule to hard copy return if using a blended rate and check here. Schedule of blended rate attached

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RECAPITULATION	INCORPORATION BASIS	OHIO BASIS
22. Fees, other obligations & taxes. Total Lines 10 plus Line 21.	0.00	350.00
COMPLETE ONLY THE COLUMN THAT HAS THE HIGHEST AMOUNT ON LINE 22		
23. Enter the larger amount from line 22.		350.00
24. Enter the amount shown on Line 10, Ohio Basis		350.00
25. Tax before credits: enter the GREATER of Line 23 minus Line 24, or \$250 minimum tax.		250.00
26. Business Tax Credit (Exhibit A, Column 2) Change Allocation 0.00		0.00
27. Enter the greater of \$250, or Line 25 minus Line 26		250.00
28. Non-Refundable Credits:(c) A. Credit for purchases of qualified low-income community investments under O.R.C. §5725.33 (c) <input type="text"/> B. Job retention credit under O.R.C. §122.171 (c) <input type="text"/> C. Other (List): (c) <input type="text"/>		0.00
29. Credit for Voluntary Contribution pursuant to Section O.R.C. 3901.47(E)		0.00
30. Credit for Payments to the Ohio Life & Health Insurance Guaranty Assn, pursuant to Section O.R.C. 3956.20		0.00
31. Total Non-Refundable Credits (add Lines 28, 29 and 30)		0.00
32. Refundable Credits (c) A. Job creation credit under §5725.33 and §122.17. (c) <input type="text"/> B. Venture capital credit under O.R.C. §5725.19 and §50.02 (c) <input type="text"/> C. Other (List): (c) <input type="text"/>		0.00
33. Total Net Tax (Line 27 minus (Line 31 plus Line 32))		250.00

SAMPLE FILE NOT ACCEPTABLE FOR FILING

TAX PREPARER'S INFORMATION
Name
<input style="width: 100%;" type="text"/>
Title
<input style="width: 100%;" type="text"/>

NOTE:
 * Documentation must be attached electronically prior to submission of this tax return. Click the "Attach Documents" option which is located next to the SUBMIT button, attaching one file at a time.

INS 7146

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|------------------|------------|------------------|--------|
| Check For Errors | Save Draft | Attach Documents | Submit |
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