## **IB-13**

Web 1-11

## Gross Premium Tax Return Life, Accident, Health and Title Companies

North Carolina Department of Revenue

				DOR Use Only		
For tax year beginning (MM-DD-YY)	= and end	ling (MM-DD-YY)				
Legal Name (First 35 Characters) (USE CAPITAL L	ETTERS FOR YOUR NAME AND ADDRESS	S)				
				Federal Employer ID Number		
Mailing Address						
City		State Zip	Code			
,				NCDOR ID Number		
Name of Contact Person	Phone Number	Stat	e of Domicile			
			_			
Fill in circle if applicable:				NAIC Number		
O Payment has been made through	electronic funds transfer (EFT)					
Amended Return						
Date of Withdrawal if Company Su	rrendered Certificate of Author	rity to do Busir	ness in NC Durin	ng the Year = =		
Schedule A. Summary of Ar	nount Due					
1. Total 2010 Gross Premium T (From Schedule B, Part 3, Lin			1.		00	
	·					
2. Total 2010 Insurance Regula (From Schedule C, Line 7)	tory Charge Due		2.		00	
(From Sonedale S, Ellie T)				-, - , - ,	,	
3. Total Payment Due for 2010 Add Line 1 and Line 2			3. <b>\$</b>		00	
Add Line 1 and Line 2			Ψ	-	<i>J</i> O	
The following must be attache	ed to this return:					
2010 Schedule T from the Annu 2010 North Carolina Business F						
The following must be attached	ed if applicable (check all	that apply):				
Reconciliation schedule exp		ne premiums	listed on the ta	ax return, the North Carolina		
Business Page, and Schedule T						
<ul> <li>2010 Guaranty Assessment Tax Credit Available notice from either the North Carolina Life &amp; Health Insurance Guaranty Association or the North Carolina Insurance Guaranty Association</li> </ul>						
<ul> <li>Schedule in support of any supplemental workers' compensation tax credits claimed</li> </ul>						
<ul> <li>Form NC-478 and applicable series schedules in support of Article 3A, low-income housing, and mill rehabilitation tax credits claimed</li> </ul>						
Signature:	Title je, this return is accurate and complete.	):		Date:		

Returns are due by the 15th day of the 3rd month following the end of the calendar year. Your check or money order must be in the form of U.S. currency from a domestic bank.

## Schedule B. Calculation of Gross Premium Tax

Part 1. North Carolina Basis Gross Premium Tax (Multiply NC Taxable Premiums by the Applicable Tax Rate)

			NC Taxable Premiums	Tax Rate	Tax Computed on NC Basis
1.	Life Insurance	•	.,,	1.9%	.,,
2.	Annuities	•	.,,	0%	00
3.	Accident and Health	•	.,,	1.9%	.,,
4.	Workers' Comp	•	.,,	2.5%	00
5.	All Other Lines (attach schedule)	•	.,,	1.9%	00
6.	Finance Charges	•	.,,	1.9%	00
7.	Total Add Lines 1 through 6	<b>&gt;</b>	.,,		00

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Par	t 2. State of Domicile Basis Gross Premi by the Tax Rate. Attach supplemental schedule			
		NC Taxable Premiums	Tax Rate Tax Comp	uted on State of Domicile Basis
1.	Life Insurance	.,,	%	
2.	Annuities	.,,	%	.,,
3.	Accident and Health	.,,	%	
4.	Workers' Comp	.,,	%	
5.	All Other Lines (attach schedule)	.,,	%	.,,
6.	Finance Charges	.,,	%	
7.	Total Add Lines 1 through 6	.,,		00
Par	t 3. Computation of Gross Premium Tax	(		
1.	Gross Premium Tax Computed on NC Basis (From Part 1, Total Tax Computed)		1.	.,,
2.	2. Retaliatory Tax Part 2, Total Tax Computed minus Part 1, Total Tax Computed, but not less than zero.			.,,
3.	3. Gross Premium Tax Line 1 plus Line 2			
4.	Tax Credits		10	20

	(From Part 1,Total Tax Computed)			
2.	Retaliatory Tax Part 2, Total Tax Computed minus Part 1, Total Tax Computed, but not less than zero.		2.	00
3.	Gross Premium Tax Line 1 plus Line 2		3.	00
4.	Tax Credits a. NC Guaranty Fund Assessment Credit (From Schedule E, total; not to exceed Line 3)	<b>&gt;</b>	4a.	.,,
	b. NC-478 Tax Credits (Limited, attach NC-478 forms)	<b>&gt;</b>	4b.	00
5.	Gross Premium Tax Liability Line 3 minus Lines 4a and 4b, but not less than zero	<b>&gt;</b>	5.	00
6.	Prior Year Credit Applied to 2010 (From Schedule D, Line 1, Column 1)	<b>&gt;</b>	6.	00
7.	Gross Premium Tax Installment Payments (From Schedule D, Line 5, Column 1)	<b>&gt;</b>	7.	00
8.	Balance of Gross Premium Tax Due Line 5 minus Lines 6 and 7, but not less than zero. If less than zero, enter amount on Line 11.		8.	.,,
9.	a. Interest ▶	)		(See <u>www.dornc.com</u> for current interest rate and penalty information)

10. Total Gross Premium Tax Due (Add Lines 8, 9a and 9b)

11. Overpayment

Legal Name			EIN		— Page 3, Form IB-13, Web, 1-11	
Par	t 3. Computation of Gross Premium Tax (	continued)				
12.	Amount of Line 11 to be Applied to 2011 Gross Pr	emium Tax		<b>▶</b> 12.	.00	
13.	13. Gross Premium Tax to be Refunded Line 11 minus Line 12				.,,	
Sch	edule C. Insurance Regulatory Charge					
1.	Gross Premium Tax Liability (From Schedule B, Part 1, Total Tax Computed)			<b>&gt;</b> 1.		
2.	Insurance Regulatory Charge Multiply Line 1 by 6.0%			2.		
3.	Prior Year Credit Applied to 2010 (From Schedule D, Line 1, Column 2)			<b>&gt;</b> 3.		
4.	Insurance Regulatory Charge Installment Payment (From Schedule D, Line 5, Column 2)	ts		<b>&gt;</b> 4.		
5.	Balance of Insurance Regulatory Charge Due Line 2 minus Lines 3 and 4, but not less than zero. If I	ess than zero, er	nter amount on Line	5. 8.		
6.	a. Interest • 00 b. P	enalties >		-00	(See <u>www.dornc.com</u> for current interest rate and penalty information)	
7.	Total Insurance Regulatory Charge Due (Add Lines 5, 6a and 6b)	_	<del> </del>	7. \$		
8.	Overpayment			▶ 8.		
9.	Amount of Line 8 to be Applied to 2011 Insurance	Regulatory Cha	rge	<b>&gt;</b> 9.	.,,	
10.	Insurance Regulatory Charge to be Refunded Line 8 minus Line 9			10.		
Sc	hedule D. Installment Payments Made (SP	nould not include	any negative amoun	ts)		
			(1) Gross Pr	emium Tax	(2) Insurance Regulatory Charge	
1.	Prior Year Credit Applied to 2010 (Gross Premium Tax - from 2009 IB-13, Sch. B, Part 3 (Insurance Regulatory Charge - from 2009 IB-13, Sch	, Line 10) . C, Line 7)				
2.	Installment Payment made April 15, 2010 (Do not include amount on Line 1) (Gross Premium Tax - from 2010 IB-14, Part 1, Line 4) (Insurance Regulatory Charge - from 2010 IB-14, Part					
3.	Installment Payment made June 15, 2010 (Do not include amount on Line 1) (Gross Premium Tax - from 2010 IB-14, Part 1, Line 4) (Insurance Regulatory Charge - from 2010 IB-14, Part					
4.	4. Installment Payment made October 15, 2010 (Do not include amount on Line 1) (Gross Premium Tax - from 2010 IB-14, Part 1, Line 4) (Insurance Regulatory Charge - from 2010 IB-14, Part 2, Line 8)					
5.	<b>Total Installment Payments Made in 2010</b> Add Lines 2 through 4					
Sc	hedule E. Guaranty Association Credit Ava	ilable				
		Assessn	nent Amount	Percentage	Amount of Credit	
1	Assessment Year 2005			1 1		
				」 20%		
2.	Assessment Year 2006			<b>20%</b>		
3.	Assessment Year 2007			20%		
4.	Assessment Year 2008			20%		
5.	Assessment Year 2009			20%		
				Total		