

Department of the Treasury
Internal Revenue Service

For calendar 1987, or tax year beginning _____, 1987, and ending _____, 19 _____

1987

► **For Paperwork Reduction Act Notice, see page 1 of the instructions.**

Please type or print	Name	A Employer identification number
	Number and street	B Date incorporated
	City or town, state, and ZIP code	C Check box if this is a consolidated return . . . ► <input type="checkbox"/>
		D Check box if nonlife insurance companies are included . . . ► <input type="checkbox"/>
E Check applicable boxes: 1 <input type="checkbox"/> Final return 2 <input type="checkbox"/> Change in address 3 <input type="checkbox"/> Amended return		
F Check box if a section 953(c)(3)(C) election has been made ► <input type="checkbox"/>		

Taxable Income	1 Life insurance company taxable income (LICTI)—(Schedule A, line 20)	1
	2 Limitation on noninsurance losses (Schedule P, line 9)	2
	3 Amount subtracted from policyholder surplus account (Schedule N, line 3)	3
	4 Total taxable income—Add lines 1, 2, and 3; however, the total may not be less than line 3	4

Tax	5 Check if you are a member of a controlled group (see sections 1561 and 1563). ► <input type="checkbox"/> If checked and your tax year includes June 30, 1987, complete 5a and 5b; otherwise complete only 5b.	
	a Enter your share of the \$25,000 amount in each taxable income bracket: (i) \$ _____ (ii) \$ _____ (iii) \$ _____ (iv) \$ _____	
	b Enter your share of tax bracket amounts for the period after June 30, 1987: (i) \$ _____ (ii) \$ _____	
6 Income tax (see instructions to figure the tax). If you use the alternative tax, check this box <input type="checkbox"/> and enter the tax from your attached schedule	6	

Tax	7a Foreign tax credit (attach Form 1118)	7a	
	b Other credits (see instructions)	7b	
	c General business credit. Check if from: <input type="checkbox"/> Form 3800 <input type="checkbox"/> Form 3468 <input type="checkbox"/> Form 5884 <input type="checkbox"/> Form 6478 <input type="checkbox"/> Form 6765 <input type="checkbox"/> Form 8586	7c	
	8 Total credits (add lines 7a through 7c)	8	
	9 Balance of tax (subtract line 8 from line 6)	9	
	10 Foreign corporations—tax on income not connected with U.S. business (see <i>Tax Computation Instructions</i>)	10	
	11 Increase in tax from refiguring an earlier year investment credit (attach Form 4255)	11	
	12a Alternative minimum tax (see instructions—attach Form 4626)	12a	
	b Environmental tax (see instructions—attach Form 4626)	12b	
	13 Total tax (add lines 9 through 12b)	13	
	14a Overpayment from 1986 allowed as a credit	14a	
	b 1987 estimated tax payments	14b	
	c Less refund of 1987 estimated tax applied for on Form 4466	14c ()	
	d Tax deposited with Form 7004	14d	
	e Credit from regulated investment companies (attach Form 2439)	14e	
f Federal tax on gasoline and special fuels (attach Form 4136)	14f		
g U.S. income tax paid or withheld at source	14g		
h Other payments (see instructions)	14h		
15 Total refundable credits (combine lines 14a through 14h)	15		
16 Enter any PENALTY for underpayment of estimated tax—Check ► <input type="checkbox"/> if Form 2220 is attached.	16		
17 TAX DUE —If the total of lines 13 and 16 is larger than line 15, enter AMOUNT OWED	17		
18 OVERPAYMENT —If line 15 is larger than the total of lines 13 and 16, enter AMOUNT OVERPAID	18		
19 Enter amount of line 18 you want: Credited to 1988 estimated tax ► \$ _____ Refunded ► \$ _____	19		

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which the preparer has any knowledge.

Signature of officer	Date	Title
Preparer's signature	Date	Preparer's social security no.
Firm's name (or yours, if self-employed) and address	E.I. No.	ZIP Code
	Check if self-employed ► <input type="checkbox"/>	

SCHEDULE A Life Insurance Company Taxable Income (LICTI) (Section 801(b))

1	Gross premiums, etc., less return premiums, etc. Enter balance	
2	Decrease in reserves (see instructions)	
3	10% of any decrease in reserves under section 807(f)(1)(B)(ii)	
4	Investment income (Schedule C, line 8)	
5	Net capital gain (line 10, Schedule D (Form 1120))	
6	Other amounts (attach schedule)	
7	Life insurance company gross income (add lines 1 through 6)	
8	Death benefits, etc.	
9	Increase in reserves (Schedule B, line 12)	
10	10% of any increase in reserves under section 807(f)(1)(B)(i)	
11	Deductible policyholder dividends (Schedule E, line 7)	
12	Consideration paid for assumption by another person of liabilities	
13	Dividends reimbursable by taxpayer	
14	Other deductions (attach schedule—see instructions)	
15	Dividends-received deduction (Schedule G, column (c), line 12—see instructions for limitation and attach schedule if applicable), enter here and on Schedule M, line 2c	
16	Operations loss deduction (attach schedule)	
17	Total deductions (add lines 8 through 16)	
18	Gain or (loss) from operations (subtract line 17 from line 7), enter here and on Schedule H, line 1	
19	Small life insurance company deduction (Schedule H, line 10) enter here and on Schedule M, line 2b	
20	LICTI (line 18 less line 19), enter here and on page 1, line 1	

SCHEDULE B Increase or (Decrease) in Reserves (Section 807)

	(a) Beginning of tax year	(b) End of tax year
1	Life insurance reserves (section 807(c)(1))	
2	Unearned premiums and unpaid losses (section 807(c)(2))	
3	Supplementary contracts (section 807(c)(3))	
4	Dividend accumulations and other amounts (section 807(c)(4))	
5	Advance premiums (section 807(c)(5))	
6	Special contingency reserves (section 807(c)(6))	
7	Total (add lines 1 through 6 in both columns)	
8	Increase (decrease) in reserves (column (b) less column (a)) (see instructions)	
9	Policyholders' share of tax-exempt interest (Schedule C, line 9 times Schedule K, line 26)	
10	Line 8 less line 9	
11	Less: Adjustment to reserves of mutual insurance company per section 809(a)(2) (Schedule E, line 8)	
12	Net increase (decrease) in reserves. (If an increase, enter here and on Schedule A, line 9. If a (decrease), enter here and on Schedule A, line 2.)	

SCHEDULE C Gross Investment Income (Section 812(d))

1	Interest (excluding tax-exempt interest)	
2	Dividend income (Schedule G, column (a), line 12)	
3	Gross rents	
4	Gross royalties	
5	Leases, terminations, etc.	
6	Excess of net short-term capital gain over net long-term capital loss (line 9, Schedule D (Form 1120))	
7	Gross income from trade or business other than insurance (attach schedule)	
8	Investment income (add lines 1 through 7), enter here and on Schedule A, line 4	
9	Tax-exempt interest, enter here and on Schedule K, line 5 and on Schedule M, line 2d	
10	Add lines 8 and 9	
11	100% qualifying dividends (see instructions)	
12	Gross investment income (line 10 less line 11), enter here and on Schedule K, line 1	

SCHEDULE E Policyholder Dividends (Section 808)

1	Amounts paid or accrued	
2	Excess interest	
3	Premium adjustments	
4	Experience-rated refunds	
5	Total (add lines 1 through 4)	
6	Differential earnings amount for mutual company only (Schedule F, line 15)	
7	Deductible policyholder dividends (line 5 minus line 6, but not less than zero), enter here and on Schedule A, line 11 and Schedule K, line 10	
8	Excess of line 6 over line 5: Adjustment to reserves of mutual insurance company, enter here and on Schedule B, line 11	
9	Deductible percentage (line 7 divided by line 5)	%

SCHEDULE F Differential Earnings Amount—Mutual Companies Only (Section 809)

	(a) End of preceding tax year	(b) End of this tax year
1	Annual statement surplus and capital	
2	Nonadmitted financial assets (attach schedule)	
3	Excess of statutory reserves over tax reserves on section 807(c) items	
4	Deficiency reserves	
5	Mandatory securities valuation reserve	
6	Other voluntary reserves	
7	50% of the amount of any provision for policyholder dividends payable in the next tax year	
8a	Subtotal (add lines 1 through 7)	
b	Adjustment for equity allocable to noncontiguous Western Hemisphere countries and other adjustments	
c	Combine line 8a and line 8b, both columns	
9	Total of line 8c, columns (a) and (b)	
10	Tentative average equity base—Enter 50% of line 9	
11	Other adjustments	
12	Total of lines 10 and 11	
13	High surplus adjustment (section 809 (i))—attach schedule	
14	Average equity base (line 12 less line 13)	
15	Differential earnings amount (line 14 times the differential earnings rate), enter here and on Schedule E, line 6	see instructions

SCHEDULE G Dividend Income and Dividends-Received Deduction (See instructions.)

Dividends subject to proration	(a) Gross taxable dividends	(b) Deduction rate	(c) Deduction (column (a) times column (b))
1	Certain domestic corporations80	
2	Certain debt-financed stock	see instructions	
3	Certain public utility corporations	see instructions	
4	Certain foreign corporations	see instructions	
5	Certain foreign corporations	1.00	
6	Certain affiliated company dividends	1.00	
7	Gross dividends-received deduction (add lines 1 through 6 of column (c))		
8	Company share percentage (Schedule K, line 25)		
9	Prorated amount (line 7 times line 8)		
Dividends not subject to proration			
10	Affiliated company dividends	see instructions	
11	Other corporate dividends		
12	Total (add lines 1 through 11 in column (a) and lines 9 and 10 in column (c)). (Reduce the deduction as provided in section 805(a)(4)(D)(ii).)—Enter the amount from line 12, column (a), on Schedule C, line 2, and enter the amount from line 12, column (c), on Schedule A, line 15		

SCHEDULE H Small Life Insurance Company Deduction (Section 806(a))—If assets (Schedule O, Part I) are \$500,000,000 or more, complete lines 1 through 5, line 9, and enter zero on line 10. (See instructions.)

1	Gain or (loss) from operations (Schedule A, line 18)		
2a	Less: noninsurance income		
b	Plus: noninsurance deductions		
3a	Gain or (loss) on insurance operations (line 1 less line 2a plus line 2b)		
b	Adjustments (attach schedule)		
c	Tentative LICTI (total of lines 3a and 3b)		
4	Controlled group tentative LICTI (Schedule I, line 8)		
5	Combined tentative LICTI (line 3c plus line 4). If \$15,000,000 or more, omit lines 6 through 8, enter zero on line 10, below, and on Schedule A, line 19		
6	Line 5 times .6, but not more than \$1,800,000	x .6	
7a	Maximum statutory amount	3,000,000	
b	Subtract line 7a from line 5, but not less than zero		
c	Line 7b times .15, but not over \$1,800,000	x .15	
8	Tentative small life insurance company deduction (line 6 less line 7c)		
9	Taxpayer's share (line 3c—but not less than zero—divided by the sum of line 3c and Schedule I, column (a), line 6)		
10	Allowable small life insurance company deduction (line 9 times line 8). Enter here and on Schedule A, line 19.		

SCHEDULE I Controlled Group Information (See instructions.)

	Company	Tentative LICTI	
		(a) Income	(b) (Loss)
1			
2			
3			
4			
5			
6	Total—Add lines 1 through 5 in both columns		
7	Enter amount from line 6, column (b)		
8	Net controlled group tentative LICTI (line 6 less line 7). Enter here and on Schedule H, line 4.		

SCHEDULE K Company/Policyholder Share Percentage (Section 812)—Part I (See instructions.)

1	Gross investment income (Schedule C, line 12)		
2	Policy interest (Schedule L, line 6)		
3	Line 1 less line 2		
4	Life insurance company gross income		
5	Tax-exempt interest (Schedule C, line 9)		
6	Add lines 4 and 5		
7	Increase in reserves (Schedule B, line 8) (If a decrease in reserves, enter "0".)		
8	Line 6 less line 7		
9	Investment income ratio (line 3 divided by line 8)		
10	Deductible policyholder dividends (Schedule E, line 7)		
11	Deductible excess interest (Schedule L, line 2)		
12	Deductible dividends on employee pension funds		
13	Deductible dividends on deferred annuities		
14	Deductible premium and mortality charges for contracts paying excess interest		
15	Add lines 11 through 14		
16	Line 10 less line 15		
17	Investment portion of dividends (line 9 times line 16)		
18	Policy interest (Schedule L, line 6)		
19	Policyholder share amount (add lines 17 and 18)		

SCHEDULE K Part II

20	Gross investment income (line 1)	
21	Net investment income (see instructions)	
22	Policyholder share amount (line 19)	
23	Company share of net investment income (line 21 less line 22)	
24	Total share percentage	100%
25	Company share percentage (line 23 divided by line 21). Enter here and on Schedule G, line 8	
26	Policyholders' share percentage (line 24 less line 25)	

SCHEDULE L Policy Interest (Section 812(b)(2))

- 1 Required interest on reserves under sections 807(c)(1), (3), (4), (5), and (6)—attach schedule
- 2 Deductible excess interest (Schedule E, line 2 times Schedule E, line 9). Enter here and on Schedule K, line 11.
- 3 Deductible amounts credited to employee pension funds
- 4 Deductible amounts credited to deferred annuities
- 5 Deductible interest on amounts left on deposit (section 812(b)(2)(D))
- 6 Total policy interest (add lines 1 through 5). Enter here and on Schedule K, lines 2 and 18

SCHEDULE M Shareholders' Surplus Account—Stock Companies Only (Section 815(c))

- 1a Balance at the beginning of the tax year
- b Transfers under pre-1984 section 815(d)(1) and (4) for preceding year
- c Balance at the beginning of the tax year (add lines 1a and 1b)
- 2a LICTI (page 1, sum of lines 1 and 2, but not less than zero)
- b Small life insurance company deduction allowed by section 806(a) (Schedule A, line 19)
- c Dividends-received deduction (Schedule A, line 15)
- d Tax-exempt interest (Schedule C, line 9)
- 3 Total (add lines 1c through 2d)
- 4 Tax liability without regard to section 815 (figure the tax on line 2a as if line 2a were total taxable income)
- 5 Line 3 less line 4 (do not enter less than zero)
- 6 Direct or indirect distributions in the tax year (not more than line 5)
- 7 Balance at the end of the tax year (line 5 less line 6)

SCHEDULE N Policyholders' Surplus Account—Stock Companies Only (Section 815(d))

- 1 Balance at the beginning of the tax year.
- 2a Direct or indirect distributions in excess of the amount on Schedule M, line 5
- b Tax increase on line 2a
- c Subtractions from account under pre-1984 sections 815(d)(1) and (4) (see instructions).
- d Tax increase on line 2c
- e Subtraction from account required under pre-1984 section 815(d)(2) due to termination
- 3 Total—Add lines 2a through 2e, but not more than line 1
- 4 Balance at the end of the tax year (line 1 less line 3)

SCHEDULE O Total Assets and Total Insurance Liabilities

Part I—Total Assets (Section 806(a)(3)(C))

- 1 Real property
- 2 Stocks
- 3 Proportionate share of partnership and trust assets
- 4 Other assets (attach schedule)
- 5 Total assets of controlled groups
- 6 Total (add lines 1 through 5)

As of Close of
Tax Year

SCHEDULE O Total Assets and Total Insurance Liabilities—Continued

Part II—Total Insurance Liabilities (Section 813(a)(4)(B))

Item	(a) Section	(b) Description of item	(c) Liabilities at close of tax year
1	816(c)(1)	Reserve for life policies and contracts	
2	816(c)(2)	Reserve for accident and health policies	
3	807(c)(3)	Supplementary contracts without life contingencies	
4	816(c)(2)	Policy and contract claims, life	
5	816(c)(3)	Policy and contract claims, accident and health	
6	807(c)(4)	Policyholders' dividend and coupon accumulations	
7	807(c)(5)	Premiums and annuity considerations received in advance Less: Discount	
8	807(c)(5)	Liability for premium and other deposit funds	
9		Miscellaneous insurance liabilities, not included above:	
	807(c)(6)	a Special contingency reserves for group life, health and accident insurance.	
	807(c)(3)	b Amounts held at interest under insurance, annuity or deposit administration contracts, or pension trust side funds	
	807(c)(3)	c Funds held to provide for future conversion of policies or contracts	
	807(c)(3)	d Amounts held pending issue of contracts supplementary to insurance or annuity contracts	
	816(c)(3)	e Other insurance liability or adjustments:	
		(i) Reserves for mortality fluctuations	
		(ii) Liability for insurance or annuity benefits for employees and agents	
	816(c)(3)	f Other items (please describe):	
		
		
		
		
		
		
		
		
		
10		Total	

SCHEDULE P Limitation on Noninsurance Losses (Section 806(b)(3)(C))

1	Noninsurance income (attach schedule)	
2	Noninsurance deductions (attach schedule)	
3	Noninsurance operations loss deductions	
4	Add lines 2 and 3	
5	Noninsurance loss (line 4 less line 1). If line 1 is greater than line 4, omit lines 5 through 8, and enter zero on line 9.	
6	Enter 35% of line 5	
7	Enter 35% of the excess of Schedule A, line 20 over any noninsurance loss included in Schedule A	
8	Enter the lesser of line 6 or line 7	
9	Limitation on noninsurance losses (line 5 less line 8)—Enter here and on page 1, line 2	

SCHEDULE Q Additional Information Required (See instructions.)

G Check if you are a:

(1) Legal reserve company—if checked:

Kind of company:

- Stock
- Mutual

Principal business:

- Life insurance
- Health and accident insurance

(2) Fraternal or assessment association

(3) Burial or other insurance company

H Enter the percentage that the total of your life insurance reserves (section 816(b)) plus unearned premiums and unpaid losses (whether or not ascertained) on noncancellable life, health or accident policies not included in life insurance reserves is to your total reserves (section 816(c))

_____ %.

Attach a schedule of your computation.

I Do you have any variable annuity contracts outstanding? _____

J (1) Did you, at the end of the tax year, own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see section 267(c).) _____

If "Yes," attach a schedule showing:

- (a) Name, address, and identification number;
- (b) Percentage owned; and
- (c) Taxable income or (loss) before NOL or special deductions from line 28, page 1, Form 1120 (or line 24, page 1, Form 1120-A) of that corporation for the tax year ending with or within your tax year.

(2) Did any individual, partnership, corporation, estate, or trust, at the end of the tax year, own, directly or indirectly, 50% or more of your voting stock? (For rules of attribution, see section 267(c).) _____

If "Yes," attach a schedule showing:

- (a) Name, address, and identification number;
- (b) Percentage owned; and
- (c) If the owner of that voting stock was a person other than a U.S. person (see instructions), check "Yes" and show owner's country. ► _____

Note: If question J(2)(c) is checked "Yes," the corporation may have to file Form 5472.

Yes **No**

K Did you claim a deduction for:

(1) Entertainment facility (boat, resort, ranch, etc.)? _____

(2) Living accommodations (except for employees on business)? _____

(3) Employees attending conventions or meetings outside the North American area? (See section 274(h).) _____

(4) Employees' families at conventions or meetings? _____

If "Yes," were any of these conventions or meetings outside the North American area? (See section 274(h).) _____

(5) Employee or family vacations not reported on Form W-2? _____

L Were you a U.S. shareholder of any controlled foreign corporation? (See sections 951 and 957, and the instructions.) _____

If "Yes," attach Form 5471 for each corporation.

M At any time during the tax year, did you have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? (See the instructions for exceptions and filing requirements for Form TD F 90-22.1.) _____

If "Yes," write the name of the foreign country.

► _____

N Were you ever the grantor of or transferor to a foreign trust which existed during the current tax year, whether or not you have any beneficial interest in it? (See instructions.) _____

If "Yes," you may be required to file Forms 926, 3520, or 3520-A.

O During the tax year did you maintain any of your accounting/tax records on a computerized system? _____

P Check method of accounting:

- (1) Accrual
- (2) Other (Specify) _____

Q Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____

R Have you elected to use your own payout pattern for discounting unpaid losses and unpaid loss adjustment expenses? _____

S Do you discount any of the loss reserves shown on your annual statement? _____

T (1) Enter the total unpaid losses shown on your annual statement:

- (a) for the current year: \$ _____
- (b) for the previous year: \$ _____

(2) Enter the total unpaid loss adjustment expenses shown on your annual statement:

- (a) for the current year: \$ _____
- (b) for the previous year: \$ _____

Yes **No**

SCHEDULE R Reconciliation (See instructions.)

SCHEDULE S Compensation of Officers (See instructions.)