

For calendar year 1992, or tax year beginning . . . . ., 1992, and ending . . . . ., 19 . . . . .

1992

Department of the Treasury Internal Revenue Service

Instructions are separate. See page 1 For Paperwork Reduction Act Notice.

A Check if: (1) Consolidated Return (attach Form 851) (2) Nonlife insurance companies are included. B Employer identification number. C Date incorporated. Name, Number, street, and room or suite no. (If a P.O. box, see page 5 of instructions.), City or town, state, and ZIP code.

E Check applicable boxes: (1) Final return (2) Change in address (3) Amended return

F Check applicable box if an election has been made under section(s) (1) 953(c)(3)(C) (2) 953(d)

Income section table with rows 1-8: Gross premiums, Net decrease, 10% of any decrease in reserves, 3 1/2% of year end balance, Investment income, Net capital gain, Other amounts, Life insurance company gross income.

Deductions section table with rows 9-24: Death benefits, Net increase, 10% of any increase in reserves, Deductible policyholder dividends, Consideration paid, Dividends reimbursable, Interest, Other deductions, Dividends-received deduction, Operations loss deduction, Total deductions, Gain or (loss) from operations, Small life insurance company deduction, Life insurance company taxable income, Limitation on noninsurance losses, Amount subtracted from policyholder surplus account.

Tax and Payments section table with rows 25-31: Total taxable income, Total tax, 1991 overpayment credited to 1992, 1992 estimated tax payments, Less 1992 refund applied for on Form 4466, Tax deposited with Form 7004, Credit from regulated investment companies, Credit for Federal tax paid on fuels, U.S. income tax paid or withheld at source, Estimated tax penalty, TAX DUE, OVERPAYMENT, Enter amount of line 30 you want.

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.

Paid Preparer's Use Only. Preparer's signature, Date, Check if self-employed, Preparer's social security no., Firm's name (or yours if self-employed) and address, E.I. No., ZIP Code.

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

<b>Dividends subject to proration</b>		<b>(a) Dividends received</b>	<b>(b) %</b>	<b>(c) Deduction ((a) times (b))</b>
1	Domestic corporations, less-than-20%-owned (other than debt-financed stock)		70	
2	Domestic corporations, 20%-or-more-owned (other than debt-financed stock)		80	
3	Debt-financed stock of domestic and foreign corporations		see instructions	
4	Public utility corporations, less-than-20%-owned		41.176	
5	Public utility corporations, 20%-or-more-owned		47.059	
6	Foreign corporations, less-than-20%-owned, and certain FSCs		70	
7	Foreign corporations, 20%-or-more-owned, and certain FSCs		80	
8	Wholly owned foreign subsidiaries (section 245(b))		100	
9	Certain affiliated company dividends		100	
10	Gross dividends-received deduction. Add lines 1 through 9, column (c)			
11	Company share percentage from Schedule F, line 32			
12	Prorated amount. Line 10 times line 11			
<b>Dividends not subject to proration</b>			see instructions	
13	Affiliated company dividends			
14	Other corporate dividends			
15	Total. Add lines 1 through 14, column (a) and lines 12 and 13, column (c). Reduce the deduction as provided in section 805(a)(4)(D)(ii). Enter the amount from line 15, column (a), on Schedule B, line 2. Enter the amount from line 15, column (c), on Page 1, line 17 and on Schedule I, line 2c, Part I			

**SCHEDULE B Gross Investment Income (Section 812(d)) (See instructions.)**

1	Interest (excluding tax-exempt interest and interest on ESOP loans)	1		
2	Gross taxable dividends from Schedule A, line 15, column (a)	2		
3	Gross rents	3		
4	Gross royalties	4		
5	Leases, terminations, etc.	5		
6	Excess of net short-term capital gain over net long-term capital loss from line 11, Schedule D (Form 1120)	6		
7	Gross income from trade or business other than insurance (attach schedule)	7		
8	Investment income. Add lines 1 through 7. Enter here and on page 1, line 5	8		
9	Tax-exempt interest. Enter here and on Schedule F, line 13 and on Schedule I, line 2d, Part I	9		
10	Add lines 8 and 9	10		
11	100% qualifying dividends	11		
12	Gross investment income. Subtract line 11 from line 10. Enter here and on Schedule F, line 9	12		

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

		<b>(a) End of preceding tax year</b>	<b>(b) End of this tax year</b>
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	Add lines 1 through 7		
b	Adjustment for equity allocable to noncontiguous Western Hemisphere countries and other adjustments		
c	Combine lines 8a and 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 (attach schedule)		
12	Average equity base. Add lines 10 and 11		
13	Differential earnings amount (line 12 times the differential earnings rate). Enter here and on Schedule E, line 6 (see instructions)		

**SCHEDULE E Policyholder Dividends (Section 808)**

1	Amounts paid or accrued . . . . .	1		
2	Excess interest . . . . .	2		
3	Premium adjustments . . . . .	3		
4	Experience-rated refunds . . . . .	4		
5	Total. Add lines 1 through 4 . . . . .	5		
6	Differential earnings amount for mutual companies only, from Schedule C, line 13 . . . . .	6		
7	Deductible policyholder dividends. Subtract line 6 from line 5, but not less than zero. Enter here and on page 1, line 12 and on Schedule F, line 18 . . . . .	7		
8	Adjustment to reserves of mutual insurance company (excess of line 6 over line 5). Enter here and on Schedule F, line 36 . . . . .	8		
9	Deductible percentage. Divide line 7 by line 5 . . . . .	9		%

**SCHEDULE F Increase (Decrease) in Reserves (Section 807) And Company/Policyholder Share Percentage (Section 812) (See instructions.)**

		(a) Beginning of tax year		(b) End of tax year	
1	Life insurance reserves . . . . .	1			
2	Unearned premiums and unpaid losses . . . . .	2			
3	Supplementary contracts . . . . .	3			
4	Dividend accumulations and other amounts . . . . .	4			
5	Advance premiums . . . . .	5			
6	Special contingency reserves . . . . .	6			
7	Total. Add lines 1 through 6 . . . . .	7			
8	Increase (decrease) in reserves under Section 807. Subtract column (a) from column (b) . . . . .	8			
9	Gross investment income from Schedule B, line 12 . . . . .	9			
10a	Required interest on reserves under sections 807(c)(1), (3), (4), (5), and (6) (attach schedule) . . . . .	10a			
b	Deductible excess interest (Schedule E, line 2 times Schedule E, line 9). Enter here and on line 19 below . . . . .	10b			
c	Deductible amounts credited to employee pension funds . . . . .	10c			
d	Deductible amounts credited to deferred annuities . . . . .	10d			
e	Deductible interest on amounts left on deposit . . . . .	10e			
f	Total policy interest. Add lines 10a through 10e. Enter here and on line 26 below . . . . .	10f			
11	Subtract line 10f from line 9 . . . . .	11			
12	Life insurance company gross income from page 1, line 8 . . . . .	12			
13	Tax-exempt interest from Schedule B, line 9 . . . . .	13			
14	Add lines 12 and 13 . . . . .	14			
15	Increase in reserves from line 8 above. (If a decrease in reserves, enter "0".) . . . . .	15			
16	Subtract line 15 from line 14 . . . . .	16			
17	Investment income ratio. Divide line 11 by line 16 . . . . .	17			
18	Deductible policyholder dividends from Schedule E, line 7 . . . . .	18			
19	Deductible excess interest from line 10b above . . . . .	19			
20	Deductible dividends on employee pension funds . . . . .	20			
21	Deductible dividends on deferred annuities . . . . .	21			
22	Deductible premium and mortality charges for contracts paying excess interest . . . . .	22			
23	Add lines 19 through 22 . . . . .	23			
24	Subtract line 23 from line 18 . . . . .	24			
25	Investment portion of dividends. Line 17 times line 24 . . . . .	25			
26	Policy interest from line 10f above . . . . .	26			
27	Policyholder share amount. Add lines 25 and 26 . . . . .	27			
28	Net investment income (see instructions) . . . . .	28			
29	Policyholder share amount from line 27 above . . . . .	29			
30	Company share of net investment income. Subtract line 29 from line 28 . . . . .	30			
31	Total share percentage . . . . .	31		100%	
32	Company share percentage. Divide line 30 by line 28. Enter here and on Schedule A, line 11 . . . . .	32		%	
33	Policyholders' share percentage. Subtract line 32 from line 31 . . . . .	33		%	
34	Policyholders' share of tax-exempt interest. Multiply line 13 above by line 33 . . . . .	34			
35	Subtract line 34 from line 8 . . . . .	35			
36	Adjustment to reserves of mutual insurance company per section 809(a)(2) from Schedule E, line 8 . . . . .	36			
37	Net increase (decrease) in reserves. Subtract line 36 from line 35. If an increase, enter here and on page 1, line 10. If a (decrease), enter here and on page 1, line 2 . . . . .	37			

**SCHEDULE G Small Life Insurance Company Deduction (Section 806(a))**—If total assets (Schedule K, line 6, column (b)), are \$500 million or more, complete lines 8 through 12, line 16, and enter zero on line 17. (See instructions.)

**Part I—Controlled Group Information**

Company	Tentative LICTI	
	(a) Income	(b) (Loss)
1		
2		
3		
4		
5		
6 Total. Add lines 1 through 5 in both columns . . . . .		
7 Net controlled group tentative LICTI. Subtract line 6, column (b) from line 6, column (a). Enter here and on line 11 below . . . . .		

**Part II—Small Life Insurance Company Deduction**

8 Gain or (loss) from operations from page 1, line 20 . . . . .	8				
9a Noninsurance income . . . . .	9a				
b Noninsurance deductions . . . . .	9b				
10a Gain or (loss) on insurance operations. Subtract line 9a from line 8 and add line 9b . . . . .	10a				
b Adjustments (attach schedule) . . . . .	10b				
c Tentative LICTI. Combine lines 10a and 10b . . . . .	10c				
11 Net controlled group tentative LICTI from line 7, above . . . . .	11				
12 Combined tentative LICTI. Add line 10c and line 11. If \$15 million or more, skip lines 13 through 15. Enter zero on line 17 below and on page 1, line 21 . . . . .	12				
13 Enter 60% of line 12, but not more than \$1,800,000 . . . . .				13	
14a Maximum statutory amount . . . . .	14a	3,000,000			
b Subtract line 14a from line 12. If zero or less, enter -0- . . . . .	14b				
c Enter 15% of line 14b, but not more than \$1,800,000 . . . . .				14c	
15 Tentative small life insurance company deduction. Subtract line 14c from line 13 . . . . .				15	
16 Taxpayer's share. Divide line 10c by the total of line 6, column (a) and line 10c. If line 10c is zero or less, enter -0- on this line . . . . .				16	
17 Allowable small life insurance company deduction. Line 16 times line 15. Enter here and on page 1, line 21 and on Schedule I, line 2b, Part I . . . . .				17	

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

1 Noninsurance income (attach schedule) . . . . .	1		
2 Noninsurance deductions (attach schedule). . . . .	2		
3 Noninsurance operations loss deductions . . . . .	3		
4 Add lines 2 and 3 . . . . .	4		
5 Noninsurance loss. Subtract line 1 from line 4. If line 1 is greater than line 4, skip lines 5 through 8, and enter zero on line 9 . . . . .	5		
6 Enter 35% of line 5 . . . . .	6		
7 Enter 35% of the excess of LICTI (page 1, line 22) over any noninsurance loss included on page 1 . . . . .	7		
8 Enter the lesser of line 6 or line 7. . . . .	8		
9 Limitation on noninsurance losses. Subtract line 8 from line 5. Enter here and on page 1, line 23 . . . . .	9		

**SCHEDULE I Part I—Shareholders Surplus Account—Stock Companies Only (Section 815(c))**

1a	Balance at the beginning of the tax year . . . . .	1a		
b	Transfers under pre-1984 sections 815(d)(1) and (4) for the preceding year . . . . .	1b		
c	Balance at the beginning of the tax year. Add lines 1a and 1b . . . . .	1c		
2a	LICTI. Add lines 22 and 23, page 1. If zero or less, enter -0- . . . . .	2a		
b	Small life insurance company deduction from Schedule G, line 17 . . . . .	2b		
c	Dividends-received deduction from Schedule A, line 15, column (c) . . . . .	2c		
d	Tax-exempt interest from Schedule B, line 9 . . . . .	2d		
3	Total. Add lines 1c through 2d . . . . .	3		
4	Tax liability without regard to section 815. Figure the tax on line 2a as if it were total taxable income . . . . .	4		
5	Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	5		
6	Direct or indirect distributions in the tax year but not more than line 5 . . . . .	6		
7	Balance at the end of the tax year. Subtract line 6 from line 5 . . . . .	7		

**Part II—Policyholders Surplus Account—Stock Companies Only (Section 815(d)) (See instructions.)**

8	Balance at the beginning of the tax year . . . . .	8		
9a	Direct or indirect distributions in excess of the amount on line 5, Part I above . . . . .	9a		
b	Tax increase on line 9a . . . . .	9b		
c	Subtractions from account under pre-1984 sections 815(d)(1) and (4). . . . .	9c		
d	Tax increase on line 9c . . . . .	9d		
e	Subtraction from account under pre-1984 section 815(d)(2) . . . . .	9e		
10	Total. Add lines 9a through 9e, but not more than line 8. Enter here and on page 1, line 24 . . . . .	10		
11	Balance at the end of the tax year. Subtract line 10 from line 8 . . . . .	11		

**SCHEDULE J Tax Computation (See instructions.)**

1	Check if the corporation is a member of a controlled group (see sections 1561 and 1563). . . . . <input type="checkbox"/>			
2	If the box on line 1 is checked:			
a	Enter the corporation's share of the \$50,000 and \$25,000 taxable income bracket amounts (in that order): (i) \$ _____ (ii) \$ _____			
b	Enter the corporation's share of the additional 5% tax (not to exceed \$11,750). \$ _____			
3	Income tax . . . . .	3		
4a	Foreign tax credit (attach Form 1118) . . . . .	4a		
b	Other credits (see instructions) . . . . .	4b		
c	General business credit. Enter here and check which forms are attached:  <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 <input type="checkbox"/> Form 8830 <input type="checkbox"/> Form 8826	4c		
d	Credit for prior year minimum tax (attach Form 8827) . . . . .	4d		
5	<b>Total credits.</b> Add lines 4a through 4d . . . . .	5		
6	Subtract line 5 from line 3 . . . . .	6		
7	Foreign corporations—tax on income not connected with U.S. business . . . . .	7		
8	Recapture taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 . . . . .	8		
9a	Alternative minimum tax (attach Form 4626) . . . . .	9a		
b	Environmental tax (attach Form 4626) . . . . .	9b		
10	<b>Total tax.</b> Add lines 6 through 9b. Enter here and on page 1, line 26 . . . . .	10		

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

	(a) As of Beginning of Tax Year		(b) As of Close of Tax Year	
1 Real property . . . . .	1			
2 Stocks . . . . .	2			
3 Proportionate share of partnership and trust assets . . . . .	3			
4 Other assets (attach schedule) . . . . .	4			
5 Total assets of controlled groups . . . . .	5			
6 Total assets. Add lines 1 through 5 . . . . .	6			

**SCHEDULE K Part II—Total Assets and Total Insurance Liabilities (Section 842(b)(2)(B)(i))**

Line references are to the "Assets" (lines 1 and 2) and "Liabilities, Surplus, and Other Funds" (lines 3 through 16) Sections of the NAIC Annual Statement.

	(a) As of Beginning of Tax Year		(b) As of Close of Tax Year	
1 Subtotals for Assets (line 22) . . . . .	1			
2 Total Assets (line 24) . . . . .	2			
3 Reserve for life policies and contracts (line 1) . . . . .	3			
4 Reserve for accident and health policies (line 2) . . . . .	4			
5 Supplementary contracts without life contingencies (line 3) . . . . .	5			
6 Life policy and contract claims (line 4.1) . . . . .	6			
7 Accident and health policy and contract claims (line 4.2) . . . . .	7			
8 Policyholder's dividend and coupon accumulations (line 5) . . . . .	8			
9 Premiums and annuity considerations received in advance less discount (line 9) . . . . .	9			
10 Policyholder premiums (line 10.1) . . . . .	10			
11 Guaranteed interest contracts (line 10.2) . . . . .	11			
12 Other contract deposit funds (line 10.3). . . . .	12			
13 Surrender values on cancelled policies (line 11.1). . . . .	13			
14 Part of other amounts payable on reinsurance assumed (line 11.3) . . . . .	14			
15 Part of aggregate write-ins for liabilities (line 25). (Only include items or amounts includable in "total insurance liabilities on U.S. business" as defined in section 842(b)(2)(B)(i)) . . . . .	15			
16 Separate accounts statement (line 27) . . . . .	16			
17 Total insurance liabilities. Add lines 3 through 16 . . . . .	17			

**SCHEDULE L** Other Information (See instructions.)

	Yes	No		Yes	No
<b>1</b> Check method of accounting:			<b>b</b> the total value of all classes of stock of the corporation? . . . . .		
<b>a</b> <input type="checkbox"/> Accrual			If "Yes,"		
<b>b</b> <input type="checkbox"/> Other (specify) .....			<b>(1)</b> Enter percentage owned ▶ .....		
<b>2</b> Check if the corporation is a:			<b>(2)</b> Enter owner's country ▶ .....		
<b>a</b> <input type="checkbox"/> Legal reserve company—if checked:			.....		
Kind of company:			The corporation may have to file Form 5472.		
<b>(1)</b> <input type="checkbox"/> Stock			(See page 15 for penalties that may apply.)		
<b>(2)</b> <input type="checkbox"/> Mutual			Enter number of Forms 5472 attached		
Principal business:			▶ .....		
<b>(1)</b> <input type="checkbox"/> Life insurance			<b>8</b> Was the corporation a U.S. shareholder of any		
<b>(2)</b> <input type="checkbox"/> Health and accident insurance			controlled foreign corporation? (See sections		
<b>b</b> <input type="checkbox"/> Fraternal or assessment association			951 and 957.) . . . . .		
<b>c</b> <input type="checkbox"/> Burial or other insurance company			If "Yes," attach Form 5471 for each such		
<b>3</b> Enter the percentage that the total of the			corporation.		
corporation's life insurance reserves (section			Enter number of Forms 5471 attached		
816(b)) plus unearned premiums and unpaid			▶ .....		
losses (whether or not ascertained) on			<b>9</b> At any time during the 1992 calendar year, did		
noncancelable life, health or accident policies			the corporation have an interest in or a		
not included in life insurance reserves bears to			signature or other authority over a financial		
the corporation's total reserves (section 816(c))			account in a foreign country (such as a bank		
_____ %.			account, securities account, or other financial		
Attach a schedule of the computation.			account)? If "Yes," the corporation may have		
<b>4</b> Does the corporation have any variable annuity			to file Form TD F 90-22.1.) . . . . .		
contracts outstanding? . . . . .			If "Yes," enter the name of foreign country.		
<b>5</b> Did the corporation at the end of the tax year			▶ .....		
own, directly or indirectly, 50% or more of the			<b>10</b> Was the corporation the grantor of, or		
voting stock of a domestic corporation? (For			transferor to, a foreign trust that existed during		
rules of attribution, see section 267(c).) . . . . .			the current tax year, whether or not the		
If "Yes," attach a schedule showing:			corporation has any beneficial interest in it? . . . . .		
<b>a</b> Name and identifying number;			If "Yes," the corporation may have to file Forms		
<b>b</b> Percentage owned; and			926, 3520, or 3520-A.		
<b>c</b> Taxable income or (loss) before NOL and			<b>11</b> Has the corporation elected to use its own		
special deductions of such corporation for the			payout pattern for discounting unpaid losses		
tax year ending with or within your tax year.			and unpaid loss adjustment expenses? . . . . .		
<b>6</b> Did any individual, partnership, corporation,			<b>12</b> Does the corporation discount any of the loss		
estate, or trust at the end of the tax year own,			reserves shown on its annual statement? . . . . .		
directly or indirectly, 50% or more of the			<b>13a</b> Enter the total unpaid losses shown on the		
corporation's voting stock? (For rules of			corporation's annual statement:		
attribution, see section 267(c).) If "Yes,"			<b>(1)</b> for the current year: \$ _____		
complete a, b, and c below. . . . .			<b>(2)</b> for the previous year: \$ _____		
<b>a</b> Is the corporation a subsidiary in an affiliated			<b>b</b> Enter the total unpaid loss adjustment		
group or a parent-subsidiary controlled group?			expenses shown on the corporation's annual		
<b>b</b> Enter the name and identifying number of the			statement:		
parent corporation or other entity with 50% or			<b>(1)</b> for the current year: \$ _____		
more ownership ▶ .....			<b>(2)</b> for the previous year: \$ _____		
.....			<b>14</b> If the corporation has a loss from operations		
<b>c</b> Enter percentage owned ▶ .....			for the tax year and is electing, under section		
<b>7</b> Did one foreign person at any time during the tax			810(b)(3) to forgo the carryback period, check		
year own, directly or indirectly, at least 25% of:			here . . . . . ▶ <input type="checkbox"/>		
<b>a</b> the total voting power of all classes of stock of					
the corporation entitled to vote, or					

**SCHEDULE M** Reconciliation (See instructions.)