



RETALIATORY WORKSHEET

Applicable to Foreign and Alien Taxpayers

Under Ch. 559, Government Code, you are entitled to review, request, and correct information we have on file about you, with limited exceptions in accordance with Ch. 552, Government Code. To request information for review or to request error correction, contact us at 1-800-252-1387.

Taxpayer name FIELD_1089582005452	Taxpayer number FIELD_1089582005383	Tax year 2003
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Article 21.46 Retaliatory Provision provides for a computation of taxes, fees, and assessments due based on Texas requirements compared to out-of-state requirements.

State of Incorporation
(Enter 2 character standard abbreviation.) **FIELD_108958200**

Complete the applicable line items in each column as instructed to determine the retaliatory tax due. Column I represents the State of Texas; Column II represents the State of Incorporation. File this worksheet with your "Texas Annual Insurance Maintenance, Assessment and Retaliatory Report" (Form 25-102).

RETALIATORY TAX CALCULATION		Column I State of Texas	Column II State of Incorporation
LIFE	1 Life premiums (Gross) 1a	FIELD_1089582005383	FIELD_1089582005359
	2 Deductions authorized by State of Incorporation (Allowable deductions to gross premiums) 2a	FIELD_1089582005430	FIELD_1089582005387
	3 Taxable premiums (3a) Item 1a minus item 2a; (3b) Item 1b minus item 2b 3a	FIELD_1089582005450	FIELD_1089582005347
	4 Tax rate (Applicable tax rate for the State of Incorporation) 4b		FIELD_1089582005381
	5 Texas calculation of taxable Life premiums (As applicable)		
(a) Item 3a or \$450,000 (Whichever is less) 5a	FIELD_1089582005399		
(b) Multiply item 5a X 0.00875 5b	FIELD_1089582005423		
(c) Premiums over \$450,000 5c	FIELD_1089582005375		
(d) Multiply item 5c X 0.0175 5d	FIELD_1089582005337		
6 Life premium tax due (6a) Item 5b plus item 5d; (6b) Item 3b X item 4b 6a	FIELD_1089582005386	FIELD_1089582005438	
ACCIDENT / HEALTH	7 Accident and Health premiums (Gross) 7a	FIELD_1089582005347	FIELD_1089582005393
	8 Deductions authorized by State of Incorporation (Allowable deductions to gross premiums) 8a	FIELD_1089582005438	FIELD_1089582005414
	9 Taxable premiums (9a) Item 7a minus item 8a; (9b) Item 7b minus item 8b 9a	FIELD_1089582005469	FIELD_1089582005438
10 Tax rate (Enter the applicable tax rate for the State of Incorporation) 10a	0.0175	FIELD_1089582005351	
11 Accident and Health premium tax due (11a) Item 9a X item 10a; (11b) Item 9b X item 10b 11a	FIELD_1089582005421	FIELD_1089582005321	
ANNUITIES	12 Annuity premiums (Annuities are not taxable in Texas.)		
	(12a) Taxable annuity premiums for State of Incorporation 12a	FIELD_1089582005397	
	(12b) Applicable tax rate 12b	FIELD_1089582005456	
(12c) Multiply item 12a X item 12b 12c		FIELD_1089582005408	
PROPERTY / CASUALTY	13 Property and casualty premiums (Gross) 13a	FIELD_1089582005391	FIELD_1089582005416
	14 Deductions authorized by State of Incorporation (Allowable deductions to gross premiums) 14a	FIELD_1089582005349	FIELD_1089582005460
	15 Taxable premiums (15a) Item 13a minus item 14a; (15b) Item 13b minus item 14b 15a	FIELD_1089582005443	FIELD_1089582005408
16 Tax rate (Enter the applicable tax rate for the State of Incorporation) 16a	0.016	FIELD_1089582005442	
17 Property and casualty premium tax due (17a) Item 15a X item 16a; (17b) Item 15b X item 16b 17a	FIELD_1089582005328	FIELD_1089582005427	
TITLE	18 Title insurance premiums (Gross) 18a	FIELD_1089582005404	FIELD_1089582005377
	19 Deductions authorized by State of Incorporation (Allowable deductions to gross premiums) 19a	FIELD_1089582005430	FIELD_1089582005410
	20 Taxable premiums (20a) Item 18a minus item 19a; (20b) Item 18b minus item 19b 20a	FIELD_1089582005379	FIELD_1089582005332
21 Tax rate (Enter the applicable tax rate for the State of Incorporation) 21a	0.0135	FIELD_1089582005419	
22 Title insurance premium tax due (22a) Item 20a X item 21a; (22b) Item 20b X item 21b 22a	FIELD_1089582005344	FIELD_1089582005401	
23 Total premium tax due (23a) Add items 6a, 11a, 17a and 22a; (23b) Add items 6b, 11b, 12c, 17b and 22b 23a	FIELD_1089582005330	FIELD_1089582005358	
ADJUSTMENTS	24 Credits or write-offs authorized by State of Incorporation (Enter the total amount of the credits or write-offs applicable and allowed in the State of Incorporation—do not include assessment write-offs, examination fees, or overhead assessments.)(See exception in instructions) 24a	FIELD_1089582005332	FIELD_1089582005412
	25 Net premium tax due (25a) Item 23a minus item 24a; (25b) Item 23b minus item 24b 25a	FIELD_1089582005392	FIELD_1089582005425
	26 Other taxes [Enter corporate franchise taxes, income taxes, maintenance taxes, surtaxes, or any other taxes that are required and applicable in Texas (26a) or the State of Incorporation (26b)] 26a	FIELD_1089582005442	FIELD_1089582005343
	27 Other tax credits or write-offs (Enter credits or write-offs against other taxes) 27a	FIELD_1089582005352	FIELD_1089582005326
	28 Other fees [Enter annual statement filing fee, examination fee, maintenance fee, overhead assessment fee, certificate of authority fee, or any other fees that are required and applicable in Texas (28a) or the State of Incorporation (28b)] 28a	FIELD_1089582005452	FIELD_1089582005406
29 Other fee credits or write-offs (Enter credits or write-offs against other fees) 29a	FIELD_1089582005452	FIELD_1089582005462	
TOTALS	30 TOTAL TAXES & FEES (30a) Add items 25a, 26a and 28a MINUS items 27a and 29a 30a	FIELD_1089582005464	
	(30b) Add items 25b, 26b and 28b MINUS items 27b and 29b 30b		FIELD_1089582005369
31 RETALIATORY TAX (Item 30b minus item 30a; if less than 0, enter 0) Enter here and on Form 25-102, line 25 31		FIELD_1089582005440	