



Name and address (please correct any errors)

FIELD\_1089336036122  
FIELD\_1089336036205

Tax Period  
FIELD\_1089336036219  
Return due on or before  
FIELD\_1089336036216  
Account Number  
FIELD\_1089336036112  
Use this number for all references

Round to whole dollar amounts

1. Gross tax due (amount from Schedule A, line 35 or 36, whichever is greater, but not less than zero) .....	1	FIELD_1089336036198	00
2. Utah based companies only. Examination fees (attach schedule) .....	2	FIELD_1089336036264	00
3. Guaranty Association credit (please note restrictions in the instructions) ...	3	FIELD_1089336036183	00
4. Total credits (add lines 2 and 3) .....	4	FIELD_1089336036213	00
5. Allowable credits (lesser of line 1 or line 4, but not less than zero) .....	5	FIELD_1089336036197	00
6. Previous Guaranty Association Credit Refunds (see instructions) .....	6	FIELD_1089336036194	00
7. Total tax due (line 1 less line 5 plus line 6). If less than zero, enter "0" .....	7	FIELD_1089336036260	00
8. Prepayments			
a. Guaranty Association refunds remitted .....	8a	FIELD_1089336036118	00
b. Refund applied from prior years .....	8b	FIELD_1089336036261	00
c. First quarter .....	8c	FIELD_1089336036134	00
d. Second quarter .....	8d	FIELD_1089336036129	00
e. Third quarter .....	8e	FIELD_1089336036127	00
9. Total prepayments (add lines 8a through 8e) .....	9	FIELD_1089336036179	00
10. TAX DUE WITH RETURN (if line 7 is greater than line 9, subtract line 9 from line 7 and enter amount) .....	10	FIELD_1089336036273	00
11. OVERPAYMENT (if line 9 is greater than line 7, subtract line 7 from line 9 and enter amount) .....	11	FIELD_1089336036211	00

Check box at right if you want refund applied to tax for 2004

<b>INS</b>	
1	FIELD_1089336036198 00
2	FIELD_1089336036264 00
3	FIELD_1089336036183 00
4	FIELD_1089336036213 00
5	FIELD_1089336036197 00
6	FIELD_1089336036194 00
7	FIELD_1089336036260 00
8a	FIELD_1089336036118 00
8b	FIELD_1089336036261 00
8c	FIELD_1089336036134 00
8d	FIELD_1089336036129 00
8e	FIELD_1089336036127 00
9	FIELD_1089336036179 00
10	FIELD_1089336036273 00
11	FIELD_1089336036211 00

**DO NOT INCLUDE UTAH STATE INSURANCE DEPARTMENT FEES WITH THIS RETURN.**

I declare under the penalties provided by law that to the best of my knowledge this is a true, complete and correct return.

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Return Prepared By \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Make a copy for your records. Return ENTIRE form, coupon and payment to the Utah State Tax Commission.



**INSURANCE PREMIUM TAX RETURN - TC-49**

TC-49\_1.ai Rev. 12/03

Federal ID Number	Filing Period	Due Date
FIELD_1089336036203	FIELD_1089336036133	FIELD_1089336036133
FIELD_1089336036206		
FIELD_1089336036191		

Amount Paid  
FIELD\_1089336036181 00

Make check or money order payable to the Utah State Tax Commission.  
Do not send cash. Do not staple check to this coupon.

UTAH STATE TAX COMMISSION  
INSURANCE PREMIUM TAX RETURN  
210 N 1950 W  
SLC UT 84134-0130

FIELD\_1089336036189

# Utah Insurance Premium Tax Return — Schedule A

**Annual Report Totals. Include an 8 1/2" x 11" copy of the Utah business page and/or Schedule T of the Annual Report with this return.**

1. Life insurance companies. Enter the total from the Utah business page. ....	1. \$	FIELD_1089336036145	00
2. Property and casualty insurance companies. Enter the total from the Utah business page. ....	2. \$	FIELD_1089336036114	00
3. Other insurance companies. Enter the total amount from your annual statement of premiums written in Utah. ....	3. \$	FIELD_1089336036109	00

### Premiums received from direct business in Utah

4. Life insurance .....	• 4	FIELD_1089336036280	00
5. Annuity .....	• 5	FIELD_1089336036331	00
6. Health care .....	• 6	FIELD_1089336036261	00
7. Other disability .....	• 7	FIELD_1089336036252	00
8. Fire including allied lines .....	• 8	FIELD_1089336036263	00
9. Other than fire including allied lines .....	• 9	FIELD_1089336036284	00
10. Motor vehicle liability, personal injury protection, uninsured motorists .....	• 10	FIELD_1089336036218	00
11. Motor vehicle physical damage (non-fire portion) .....	• 11	FIELD_1089336036237	00
12. Motor vehicle damage (fire portion) .....	• 12	FIELD_1089336036269	00
13. Ocean marine .....	• 13	FIELD_1089336036268	00
14. Other (specify): .....	• 14	FIELD_1089336036253	00
15. Interest and service charges .....	• 15	FIELD_1089336036289	00
16. <b>Base Premiums</b> (add lines 4 through 15) .....	• 16	FIELD_1089336036299	00
17. Title insurance .....	• 17	FIELD_1089336036210	00

### Worker's Compensation

18a All agencies .....	• 18a	FIELD_1089336036279	00
18b Deductibles (see instructions) .....	• 18b	FIELD_1089336036258	00
19. Total of lines 18a and 18b .....	• 19	FIELD_1089336036295	00
20. <b>Total premiums</b> (add lines 16-17 & line 19) Should agree with line 1, 2 or 3 above. .... See instructions if amounts do not agree. ....	• 20	FIELD_1089336036274	00

### Deductions

21. <b>Base Premiums</b> (from line 16 at left) ....	• 21	FIELD_1089336036278	00
22. Qualifying health care premiums .....	• 22	FIELD_1089336036250	00
23. Annuity premiums (from line 5 at left) ....	• 23	FIELD_1089336036224	00
24. Ocean marine premiums .....	• 24	FIELD_1089336036284	00
25. Premiums from Utah institutions of higher education (excluding worker's compensation premiums) .....	• 25	FIELD_1089336036255	00
26. Qualifying dividends on life insurance ....	• 26	FIELD_1089336036278	00
27. Qualifying dividends on fire and allied lines ...	• 27	FIELD_1089336036274	00
28. Qualifying dividends on premiums other than life and fire (does not apply to worker's compensation) .....	• 28	FIELD_1089336036263	00
29. Total deductions (add lines 22-28) .....	• 29	FIELD_1089336036211	00
30. <b>Net taxable premiums</b> (total base premiums line 21 less line 29) .....	• 30	FIELD_1089336036286	00

### Tax Computation

If amount is less than zero, enter "none."

31. All other worker's compensation (multiply line 19 by .0975) .....	• 31	FIELD_1089336036266	00
32. Base premium tax (multiply line 30 by .0225) .....	• 32	FIELD_1089336036210	00
33. Auto insurance value study tax (multiply line 10 by .0001) .....	• 33	FIELD_1089336036218	00
34. Title insurance tax (multiply line 17 by .0045) .....	• 34	FIELD_1089336036265	00

### Gross Tax Due

35. Tax due on Utah basis (add lines 31 through 34) .....	• 35	FIELD_1089336036276	00
36. Tax due on retaliatory basis .....	• 36	FIELD_1089336036125	00

For retaliatory computation — attach separate page if more space is needed for computation.

FIELD\_1089336036168

**DO NOT ENTER ANYTHING BELOW THIS LINE**