



# Form 207F-5 Instructions

## General Instructions

Use **Form 207F-5** to report net direct premiums received during the five preceding calendar years from policies written on property or risks located or resident in Connecticut except ocean marine insurance.

Each newly licensed nonresident or foreign insurance company must file this return within 45 days of the company's initial license to transact business in Connecticut.

## Filing and Paying Electronically

File and pay Form 207F-5 electronically using **myconneCT**. DRS **myconneCT** allows taxpayers to electronically file, pay and manage state tax responsibilities.



## Filing and Paying by Mail

If you file by mail, complete this return in blue or black ink only. Do not use staples.

Make check payable to **Commissioner of Revenue Services**. To ensure payment is applied to your account, write "**Form 207F-5**" and your Connecticut Tax Registration Number on the front of your check. Be sure to sign your check and paper clip it to the front of your return. The Department of Revenue Services (DRS) may submit your check to your bank electronically.

Mail paper return to:

Department of Revenue Services  
State of Connecticut  
PO Box 2990  
Hartford CT 06104-2990

**Failure to file or failure to pay** the proper amount of tax due **will result in penalty and interest charges**. It is to your advantage to file when your return is due whether or not you are able to make full payment.

**Attachments:** Attach the following to this return:

- A copy of Schedule T for the five preceding calendar years; **and**
- A copy of the Connecticut business page from the Annual Statement filed with the Insurance Department for the five preceding calendar years.

## Line Instructions

**Line 1:** Enter gross direct premiums (less returned premiums, including cancellations) from policies written on property or risks located or resident in this state, but excluding annuity considerations and premiums received for reinsurance assumed from other companies. Include only those premiums received during the taxpayer's five preceding calendar years to the extent received prior to calendar year 2018.

**Line 2:** Enter dividends paid to policyholders on direct business, not including dividends paid on account of ownership of stock, during the taxpayer's five preceding calendar years to the extent paid prior to calendar year 2018.

**Line 3:** Enter net direct premiums from ocean marine insurance policies written on property located in this state received during the taxpayer's five preceding calendar years to the extent received prior to calendar year 2018.

**Line 4:** Enter benefit payments from group health insurance premiums as allowed by Conn. Gen. Stat. § 12-210a during the taxpayer's five preceding calendar years to the extent prior to calendar year 2018.

**Line 8:** Enter gross direct premiums (less returned premiums, including cancellations) from policies written on property or risks located or resident in this state, but excluding annuity considerations and premiums received for reinsurance assumed from other companies. Include only those premiums received during the taxpayer's five preceding calendar years to the extent received during or after calendar year 2018.

**Line 9:** Enter dividends paid to policyholders on direct business, not including dividends paid on account of ownership of stock, during the taxpayer's five preceding calendar years to the extent paid during or after calendar year 2018.

**Line 10:** Enter net direct premiums from ocean marine insurance policies written on property located in this state received during the taxpayer's five preceding calendar years to the extent received during or after calendar year 2018.

**Line 11:** Enter benefit payments from group health insurance premiums as allowed by Conn. Gen. Stat. § 12-210a during the taxpayer's five preceding calendar years to the extent during or after calendar year 2018.

**Line 16 and Line 17:** Summarize and attach schedules to support taxes and other obligations claimed on Line 16 during the five preceding calendar years. Apply Connecticut data to your state's forms for fire marshal, franchise, ocean marine, premium, and other taxes to determine the amounts a Connecticut insurance company would be required to pay in your state.

Line 16 and Line 17 include other taxes and assessments net of tax offsets allowed. Do not include *ad valorem* taxes on real or personal property; personal income taxes; fees for agents' licenses; or special purpose assessments, including but not limited to, workers compensation assessments and insurance guaranty fund assessments.

**Line 20a: Late Payment Penalty:** Multiply Line 11 by 10%. Enter the result or \$50, whichever is greater.

**Line 20b:** Multiply Line 11 by 1% per month or fraction of a month from the original due date of the return to the date of payment.

**Signature:** The treasurer of the company, or a principal officer of the company, must sign Form 207F-5.

**Paid Preparer Signature:** A paid preparer must sign and date Form 207F-5. Paid preparers must also enter their Social Security Number (SSN) or Preparer Tax Identification Number (PTIN), and their firm's FEIN in the spaces provided.

## For the Latest News

Visit the DRS website at [portal.ct.gov/DRS](http://portal.ct.gov/DRS).

## E-Services Update

Use **myconneCT** to file taxes, make payments, view filing history, and communicate with the agency simply and more efficiently on virtually any mobile device, including laptops, tablets, and smartphones, 24 hours a day, 7 days a week. For updated information, please visit the DRS website at [portal.ct.gov/DRS-myconneCT](http://portal.ct.gov/DRS-myconneCT).