



INSURANCE CORPORATION PREMIUM TAX RETURN

This form must be filed on or before March 15 of each year together with the tax payment payable to Government of Northwest Territories.

COURIER
 The Superintendent of insurance,
 Government of the Northwest Territories
 4922- 48th St., YK3
 Yellowknife, NT X1A 1N2

GENERAL POST
 The Superintendent of insurance,
 Government of the Northwest Territories
 P.O. Box 1320, YK3
 Yellowknife, NT X1A 2L9

Filed pursuant to the Insurance Act of the Northwest Territories by Companies transacting insurance for the year ending December 31, 20__

Name of Company (do not abbreviate):

Address:

1.	Total gross insurance premiums receivable in the Northwest Territories.	Life	_____	
		Other than Life	_____	
				Total 1
				=====
2. Less	(a) Premiums returned (i.e. direct written premiums receivable as reported in Annual Statement to the Superintendent of Insurance)	Life	_____	
		Other than Life	_____	
	(b) Dividends paid or accredited to policy holders in the Northwest Territories (as reported in Annual statement)	Life	_____	
		Other than Life	_____	
	(c) others adjustments (attach description)	Life	_____	
		Other than Life	_____	
				Total 2
				=====
3.	Taxable premium income (total # 1 less total # 2)		_____	
4.	Tax payable (3% of Line 3)		_____	
5.	(a) Fire premiums included on Line 3		_____	
	(b) Tax on fire premiums (1% of Line 5a)		_____	
6.	Total tax payable (Line 4 + Line 5b)		_____	
				=====

DECLARATION: I declare that the foregoing is a true and correct statement of the taxable income of the Company for the year ending December 31, 20__ and that the amount of tax herewith is the amount required to be paid in respect of the business of said Company and period.

Dated at _____ in the Province/State of _____
 This day _____ of _____ 20__

Name (PLEASE PRINT)

Title

Signature