Form	83-391-	13-3-1-999	(Rev.	09/13)	

833911331000

Mississippi Insurance Company Income Tax Return 2013

Tax Year Beginning	Tax Year Ending	
mm dd yyyy FEIN	Mississippi Secretary of State ID	mm dd yyyy
Legal Name and DBA	CHECK ALL THAT AP	PLY
Address	Amended Return	Accident and Health
	Final Return	Fire and Casualty
City State Zip +4	Accrual Basis	Life Insurance
County Code NAICS Code	Receipts and Disbursements Basis	
COMPUTATION OF TAX	(ROUND TO T	HE NEAREST DOLLAR)
1 Mississippi net taxable income (from page 2, line 17A)	1	00
2 Income tax	2	
3 Retaliatory taxes paid to other states (Mississippi corporations only; f page 4, part V, line 1)	from 3	*00
4 Income tax credits (from Form 83-401, line 3)	4	00
5 Net income tax due (line 2 minus line 3 and line 4)	5	
PAYMENTS AND TAX DUE		
6 Overpayment from prior year	6	
7 Estimated tax payments and payment with extension	7	
8 Total payments (line 6 plus line 7)	8	
9 Net total income tax due (line 5 minus line 8)	9	
10 Interest and penalty on underestimated income tax payments (from F 83-305, line 17)	Form10	00
11 Late payment interest	11	
12 Late payment penalty	12	
13 Late filing penalty (minimum \$100)	13	
14 Total balance due (if line 5 is larger than line 8, add lines 9 through	13) 14	
15 Total overpayment (if line 8 is larger than line 5, subtract line 5 from	n line 8) 15	
16 Total overpayment credited to next year (from line 15)	16	
17 Total overpayment refunded (line 15 minus line 16)	17	00

See instructions for electronic payment options or attach payment voucher, Form 83-300, with check or money order for balance due.



Mississippi Insurance Company Income Tax Return 2013

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F	ΕI	Ν
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	COMPUTATION OF NET INCOME		A MISSISSIPPI	B COMPANY-WIDE
1	Direct premiums (except accident and health premiums)			
	Less: return premiums (00)	1A _	.00 11	в00
2	Direct accident and health premiums	2A _	.00 21	в00
3	Reinsurance assumed	3A _	.00 31	B00
4	Considerations for annuities	4A	.00 41	в00
5	Considerations for supplementary contracts	5A _	00 51	в00
6	Unearned premiums (December 31st, prior year)	6A _	61	в00
7	Gross investment income	7A _	.00 71	в00
8	Other income	8A _		в00
9	Total net income (add line 1 through line 8)	9A		в00
I	DEDUCTIONS			
10	Unearned premiums (December 31st, current year)	10A _	.00 10	0B00
11	Reinsurance ceded	11A _	.00 1	1B00
12	Dividends to policy holders	12A _	.00 12	2B00
13	Total deductions (add line 10 through line 12)	13A _	.00 13	3B00
I	MISSISSIPPI NET TAXABLE INCOME			
14	Gross income (line 9 minus line 13)	14A	.00 14	4B00
15	Total deductions allocated and apportioned (from page 4, part III, line 22)	15A _	.00 1	5B00
16	Less: Mississippi net operating loss (from Form 83-155, part I, line 2)	16A _	.00 16	6B00
17	Net taxable income (loss) (line 14 minus line 15 and line 16; enter amount from 17A on page 1, line 1)	17A _	.00 1	7B00

Check box if return may be discussed with preparer

I declare, under penalties of perjury, that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, this is a true, correct and complete return. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Officer Signature and Title		Date	Bu	usiness Phone
Paid Preparer Signature	Date	Paid Preparer Address		
Paid Preparer Signature	Date	Paid Preparer Address		

Mail Return To: DEPARTMENT OF REVENUE P.O. BOX 23050 JACKSON, MS 39225-3050

Mississippi Insurance Company Income Tax Return 2013

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FEIN
PART I: EXPENSE APPORTIONMENT

PART I: EXPENSE APPORTIONMENT RATIOS C MISSISSIPPI RATIO A MISSISSIPPI **B COMPANY-WIDE** Applicable ratio(s) used on page 4, part IV, line 2 1A ______00 ^{1B} % Loss adjustment expenses (direct losses) 1C 1 2 Accident and health expenses (direct premiums and reinsurance assumed) 2A 2B 2C % . ____ ...00 3 Other underwriting expenses (direct premiums (less return premiums), annuity considerations and ЗA 3B 3C % ...00 -00 reinsurance assumed) % 4A 4B 4C Investment expenses (gross investment income) 4 .00 .00 PART II: DEDUCTIONS ALLOCATED A MISSISSIPPI **B** COMPANY-WIDE Losses, death benefits, accident and health 5 benefits (less applicable recoveries) a Paid 5Aa _____00 5Ba ____00 b Unpaid at December 31st, current year 5Ab _____00 5Bb .00 c Unpaid at December 31st, prior year 5Ac 5Bc _____00 ____00 6 Loss adjustment expenses allocated 6A 6B ____00 -00 Matured endowments 7 7A 7B .00 -00 ____00 ____00 8 Annuity benefits 8A 8B 9 Disability benefits 9A 9B ____00 ____00 10 Surrender benefits 10B 10A ____00 11 Payments on supplementary contracts 11A 11B _____00 ___00 12 Net additions to reserve funds (required by law for liquidating policies at maturity) 12A 12B ____00 -00 13 Commissions .00 13A 13B -00 14 Gross premium privilege tax 14A 14B _____00 .00 ____00 15 Other allocable taxes 15A 15B ____00 16 Rent. allocated _____00 16A ____00 17 Agency expense (attach schedule) 17A 17B .00 18 Medical and inspection fees, allocated 18A 18B ____00 .00 _____00 19 Other allocable deductions (attach schedule) 19A 19B ____00

Mississippi Insurance Company Income Tax Return 2013

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PART III: DEDUCTIONS APPORTIONED		A MISSISSIPPI		B COMPANY-WIDE
20 Non-allocable loss adjustment expenses	20A	.00	20B	00
21 Total apportioned expenses (from page 4, part IV, line 3)	21A	.00	21B	00
22 Total allocated and apportioned deductions (line 20 plus line 21; enter on page 2, line 15)	22A	00	22B	0(

PART IV: DEDUCTIONS APPORTIONED (FROM ANNUAL STATEMENT)

Expenses must be separately apportioned. Attach supplementary pages to return as needed.

	Apportionable

1 Totals (total column A minus total column B)

_____00 _____

%

-.00

..00

___00 __

Page 4

3 Total apportioned to Mississippi (multiply line 1, column C by

Applicable expense apportionment ratio (from page 3, part I)

line 2, enter amount on page 4, part III, line 21)

PART V: RETALIATORY TAXES PAID (MISSISSIPPI CORPORATIONS ONLY)

Itemize retaliatory taxes paid by state and attach copies of returns documenting amounts. Attach supplementary schedules as needed.

A Taxing Authority	B Amount	A Taxing Authority	B Amount
	-	1 Total amounts (total amounts from column B; enter amount on page 1, line 3)	00

	Mississip Insurance Company Inc 833911331000 2013			9 00 01 02 63 64 65 66 67 6	8 69 70 71 72 73 74 75 76 77 78 <u>7</u> 1
⁷ ₅Tax	x Year Beginning 01 01 2013			Tax Year Ending	12 31 2013
, ,FE	IN 99999999		Mississippi Secre	etary of State ID	9999999999
	al Name and DBA			CK ALL THAT APP	
-	a Name and DDA DX9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9				
Add		Х	Amended Returr	X n	Accident and Health
3		Х	Final Return	Х	Fire and Casualty
City	<u>3X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9</u>			X	Life Insurance
	xxxxxxxxxxxxxx xx 999999999	х	Accrual Basis	Δ	
	unty Code 99 NAICS Code 999999	х	Receipts and Dis	bursements Basis	
_	COMPUTATION OF TAX			(ROUND TO TH	HE NEAREST DOLLA
4 5 1	Mississippi net taxable income (from page 2, line 17A)			1	999999999999
5 72	Income tax			2	999999999999
3 3 3	Retaliatory taxes paid to other states (Mississippi corporations only; from page 4, part V, line 1)			3	999999999999
14	Income tax credits (from Form 83-401, line 3)			4	99999999999
2 35	Net income tax due (line 2 minus line 3 and line 4)			5	99999999999
4 5 F	PAYMENTS AND TAX DUE				
3 76	Overpayment from prior year			6	99999999999
3					
	Estimated tax payments and payment with extension			7	99999999999
5	Estimated tax payments and payment with extension Total payments (line 6 plus line 7)			8	9999999999999 999999999999
) 18					
0 1 8 2 3 9	Total payments (line 6 plus line 7) Net total income tax due (line 5 minus line 8)			8	999999999999
0 18 2 3 9 4 510	Total payments (line 6 plus line 7)			8	999999999999
2 3 3 5 10 5 7	Total payments (line 6 plus line 7) Net total income tax due (line 5 minus line 8) Interest and penalty on underestimated income tax payments (from Form 83-305, line 17)			8 9 10	999999999999 999999999999 999999999999
2 3 3 5 10 5 3 11	Total payments (line 6 plus line 7) Net total income tax due (line 5 minus line 8) Interest and penalty on underestimated income tax payments (from Form			9	999999999999 999999999999
2 18 2 2 3 3 9 4 5 10 5 7 7 3 11	Total payments (line 6 plus line 7) Net total income tax due (line 5 minus line 8) Interest and penalty on underestimated income tax payments (from Form 83-305, line 17)			8 9 10	999999999999 999999999999 999999999999
^D 18 2 3 3 9 4 5 10 6 7 7 8 11 9 12 1	Total payments (line 6 plus line 7) Net total income tax due (line 5 minus line 8) Interest and penalty on underestimated income tax payments (from Form 83-305, line 17) Late payment interest			8 9 10 11	9999999999999 9999999999999 9999999999
0 1 1 8 2 2 3 3 9 4 5 10 6 7 7 8 11 9 0 12 1 2 13 3 3	Total payments (line 6 plus line 7) Net total income tax due (line 5 minus line 8) Interest and penalty on underestimated income tax payments (from Form 83-305, line 17) Late payment interest Late payment penalty Late filing penalty (minimum \$100)			8 9 10 11 12 13	99999999999999 9999999999999 999999999
2 1 3 3 3 3 3 3 4 5 10 5 7 3 11 2 13 3 4 14 14	Total payments (line 6 plus line 7) Net total income tax due (line 5 minus line 8) Interest and penalty on underestimated income tax payments (from Form 83-305, line 17) Late payment interest Late payment penalty			8 9 10 11 12	9999999999999 9999999999999 9999999999
0 1 8 2 3 9 4 5 10 6 7 8 11 2 13 3 4 14 5 6 15 6 15 6 15	Total payments (line 6 plus line 7) Net total income tax due (line 5 minus line 8) Interest and penalty on underestimated income tax payments (from Form 83-305, line 17) Late payment interest Late payment penalty Late filing penalty (minimum \$100)			8 9 10 11 12 13	99999999999999 9999999999999 999999999
0 1 8 2 3 9 4 4 5 10 6 7 8 11 2 13 3 4 14 5 6 15 7 7 7 7	Total payments (line 6 plus line 7) Net total income tax due (line 5 minus line 8) Interest and penalty on underestimated income tax payments (from Form 83-305, line 17) Late payment interest Late payment penalty Late filing penalty (minimum \$100) Total balance due (if line 5 is larger than line 8, add lines 9 through 13)			8 9 10 11 11 12 13 13	9999999999999 9999999999999 9999999999
19 7 0 1 1 2 3 9 4 5 5 10 6 7 7 8 9 12 11 2 12 33 34 14 55 15 77 8 8 16 99 0 12 13 33 4 44 5 56 15 77 16	Total payments (line 6 plus line 7) Net total income tax due (line 5 minus line 8) Interest and penalty on underestimated income tax payments (from Form 83-305, line 17) Late payment interest Late payment penalty Late filing penalty (minimum \$100) Total balance due (if line 5 is larger than line 8, add lines 9 through 13) Total overpayment (if line 8 is larger than line 5, subtract line 5 from line 8)			8 9 10 11 11 12 13 13 14 15	99999999999999 9999999999999 999999999

Insura	Mississ nce Company I 2013	ncon	ne Tax Return		
FEIN 999999999	2013				Page 2
COMPUTATION OF NET INCOME			A MISSISSIPPI		B COMPANY-WIDE
1 Direct premiums (except accident and					
	999999999 999999999	1A	99999999999	1B	99999999999
			999999999999		9999999999999
2 Direct accident and health premiums		2A	99999999999	2B	99999999999
Reinsurance assumed		ЗA	99999999999	3B	99999999999
Considerations for annuities		4A	99999999999	4B	99999999999
Considerations for supplementary contracts		5A	99999999999	5B	99999999999
Lincorpod promiumo (December 24st. prior year)		C A		CD	
3 Unearned premiums (December 31st, prior year)		6A	99999999999	6B	99999999999
Gross investment income		7A	99999999999	7B	99999999999
3 Other income		8A		8B	
3 Other income		07	99999999999	00	99999999999
Total net income (add line 1 through line 8)		9A	99999999999	9B	99999999999
DEDUCTIONS					
0 Unearned premiums (December 31st, current year)		10A	99999999999	10B	99999999999
1 Reinsurance ceded		11A	9999999999	11B	99999999999
2 Dividends to policy holders		12A	99999999999	12B	99999999999
13 Total deductions (add line 10 through line 12)		13A	99999999999	13B	99999999999
MISSISSIPPI NET TAXABLE INCOME					
4 Gross income (line 9 minus line 13)		14A	99999999999	14B	99999999999
5 Total deductions allocated and apportioned (from pa	ige 4, part III, line 22)	15A	99999999999	15B	99999999999
6 Less: Mississippi net operating loss (from Form 83-1	55, part I, line 2)	16A	99999999999	16B	99999999999
7 Net taxable income (loss) (line 14 minus line 15 and	line 16: enter	470		470	
7 Net taxable income (loss) (line 14 minus line 15 and amount from 17A on page 1, line 1)		17A	99999999999	17B	999999999999
Check box if return may be discussed with pre	parer				
declare, under penalties of perjury, that I have examined th	nis return and accompany	ying sch	nedules and statements, and t	o the best o	of my knowledge and belie
his is a true, correct and complete return. Declaration of pr	eparer (other than taxpay	yer) is b	ased on all information of wh	ich prepare	r has any knowledge.
Officer Signature and Title			Date	Busines	s Phone
Officer Signature and Title				Dasiries	
Paid Preparer Signature	Date		Paid Preparer Address		
Paid Preparer PTIN Paid P	reparer Phone	City	State	a Zin	Code
			Stat		

2013 FEIN 99999999 B Page 3									
>	ART I: EXPENSE APPORTIONMENT RATIOS		A MISS	SISSIPPI		B COMPANY-WIDE	() MISSIS	SIPPI RAT
)	plicable ratio(s) used on page 4, part IV, line 2								
	Loss adjustment expenses (direct losses)	1A	99999	9999999	1B	99999999999	1C	999	9999
	Accident and health expenses (direct premiums and reinsurance assumed)	2A	99999	999999	2B	99999999999	2C	999.	9999
	Other underwriting expenses (direct premiums (less return premiums), annuity considerations and reinsurance assumed)	ЗA		999999	3B	99999999999	3C	999.	9999
	Investment expenses (gross investment income)	4A	99999	999999	4B	99999999999	4C	999.	9999
5	ART II: DEDUCTIONS ALLOCATED			A MISSI	SSIPPI		вс	COMPANY	-WIDE
	Losses, death benefits, accident and health								
	benefits (less applicable recoveries) a Paid		5Aa	99999	99999	5Ba		99999	99999
	b Unpaid at December 31st, current year		5Ab	99999	99999	5Bb		99999	999999
	c Unpaid at December 31st, prior year		5Ac	99999	99999	5Bc		99999	999999
	Loss adjustment expenses allocated		6A	99999	99999) 6B		99999	999999
	Matured endowments		7A	99999	99999	7B		99999	999999
	Annuity benefits		8A	99999	99999	8B		99999	999999
	Disability benefits		9A	99999				99999	
	Surrender benefits		10A	99999	99999	10B		99999	99999
	Payments on supplementary contracts		11A	99999	99999) 11B		99999	999999
	Net additions to reserve funds (required by law for liquidating policies at maturity)		12A	99999	99999) 12B		99999	999999
	Commissions		13A	99999	99999) 13B		99999	99999
	Gross premium privilege tax		14A	99999	99999) 14B		99999	99999
	Other allocable taxes		15A	99999	99999	15B		99999	99999
	Rent, allocated		16A	99999	99999	16B		99999	99999
	Agency expense (attach schedule)		17A	99999	99999			99999	999999
	Medical and inspection fees, allocated		18A	99999	99999	18B		99999	99999
	Other allocable deductions (attach schedule)		19A	99999	99999	19B		99999	999999

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		Missis Insurance Company		turn	
		201			Page 4
EIN 99	99999999				
PART III: [DEDUCTIONS APPORTION	ED	A MISSISSIPPI	B	COMPANY-WIDE
20 Non-al	llocable loss adjustment exp	enses 20A	99999999999	20B	99999999999
21 Total a	apportioned expenses (from	page 4, part IV, line 3) 21A	99999999999	21B	99999999999
	allocated and apportioned de 1; enter on page 2, line 15)			000	
		22A	99999999999	22B	999999999999
		NED (FROM ANNUAL STATEME			
	must be separately apportion	ned. Attach supplementary pages t			
Page	Line	Description	A Column (_X)	B Less Allocable Expenses	C Balance Apportionable
999999	9x9x9x9x9x9x9x9x	9x9x9x9x9x9x9x9x9x9	999999999999	99999999999	999999999999
999999	9x9x9x9x9x9x9x9x	9x9x9x9x9x9x9x9x9x9	99999999999	99999999999	99999999999
999999	9x9x9x9x9x9x9x9x	9x9x9x9x9x9x9x9x9x9	99999999999	999999999999	99999999999
999999	9x9x9x9x9x9x9x9x	9x9x9x9x9x9x9x9x9x9	99999999999	99999999999	99999999999
999999	9x9x9x9x9x9x9x9x	9x9x9x9x9x9x9x9x9x9	99999999999	99999999999	99999999999
999999	9x9x9x9x9x9x9x9x	9x9x9x9x9x9x9x9x9x9	99999999999	99999999999	99999999999
Totals (to	otal column A minus total col	umn B)	99999999999	999999999999	99999999999
Applicabl	e expense apportionment ra	tio (from page 3, part I)			999 9999
	portioned to Mississippi (mult ter amount on page 4, part I				99999999999
PART V: R	RETALIATORY TAXES PAIL	O (MISSISSIPPI CORPORATION	IS ONLY)		
temize retal	iatory taxes paid by state an	d attach copies of returns documen		plementary schedules as	needed.
A	Taxing Authority	B Amount	A Taxing Au	thority	B Amount
9x9x92	<u>x9x9x9x9x9x9x9x9</u>	x 9999999999	x9x9x9x9x9x9x9x9x9x9x9x		99999999999
.9x9x92	<u>x9x9x9x9x9x9x9x9</u>	x 99999999999	<u>x9x9x9x9x9x9x9</u>	x9x9x9x9x	99999999999
9 <u>x9x9</u> 2	<u>x9x9x9x9x9x9x9x9</u>	x 9999999999	<u>x9x9x9x9x9x9x9</u>	x9x9x9x9x	99999999999
9x9x92	<u>x9x9x9x9x9x9x9x9</u>	x 99999999999	<u>x9x9x9x9x9x9x9</u>	x9x9x9x9x	99999999999
9x9x92	<u>x9x9x9x9x9x9x9x9</u>	x 9999999999	<u>x9x9x9x9x9x9x9</u>	x9x9x9x9x	99999999999
avava	<u>x9x9x9x9x9x9x9x9</u>	x 9999999999	<u>x9x9x9x9x9x9</u>		99999999999
			Total amounts (total amo		