

U.S. Life Insurance Company Income Tax Return

For calendar year 2018 or tax year beginning _____, 2018, ending _____, 20_____

2018

▶ Go to www.irs.gov/Form1120L for instructions and the latest information.

A Check if:		Name	B Employer identification number
1 Consolidated return (attach Form 851) <input type="checkbox"/>	Please print or type	Number, street, and room or suite no. If a P.O. box, see instructions.	C Date incorporated
2 Life-nonlife consolidated return <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code	D Check applicable box if an election has been made under section(s):
3 Schedule M-3 (Form 1120-L) attached <input type="checkbox"/>			<input type="checkbox"/> 953(c)(3)(C) <input type="checkbox"/> 953(d)
E Check if:	(1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return		

Income	1 Gross premiums, etc., less return premiums, etc. Enter balance	1		
	2 Net decrease, if any, in reserves (Schedule F, line 12)	2		
	3 Decrease in reserves under section 807(f)	3		
	4 Investment income (Schedule B, line 6) (see instructions)	4		
	5 Net capital gain (Schedule D (Form 1120), line 18)	5		
	6 Income from a special loss discount account (attach Form 8816)	6		
	7 Other income (attach statement)	7		
	8 Life insurance company gross income. Add lines 1 through 7	8		
Deductions (See instructions for limitations on deductions.)	9 Death benefits, etc.	9		
	10 Net increase, if any, in reserves (Schedule F, line 12)	10		
	11 Increase in reserves under section 807(f)	11		
	12 Deductible policyholder dividends under section 808	12		
	13 Assumption by another person of liabilities under insurance, etc., contracts	13		
	14 Dividends reimbursable by taxpayer	14		
	15a Interest ▶ _____ b Less tax-exempt interest expense ▶ _____ c Bal ▶ _____	15c		
	16 Deductible policy acquisition expenses (Schedule G, line 20)	16		
	17 Reserved for future use	17		
	18 Other deductions (see instructions) (attach statement)	18		
	19 Add lines 9 through 18	19		
	20 Subtotal. Subtract line 19 from line 8	20		
21a Dividends-received and other special deductions (Schedule A, line 22)	21a			
Plus: b. Net operating loss deduction (see instructions) (attach statement)	21b			
22 Gain or (loss) from operations. Subtract line 21c from line 20	22			
23 Life insurance company taxable income (LICTI). Enter line 22 here	23			
24 Phased inclusion of balance of policyholders surplus account (see instructions)	24			
Tax, Refundable Credits, and Payments	25 Taxable income. Add lines 23 and 24 (see instructions)	25		
	26 Total tax. (Schedule K, line 10)	26		
	27 2018 Net 965 tax liability paid from Form 965-B, Part II, column (k), line 2	27		
	28a 2017 overpayment credited to 2018	28a		
	b Prior year(s) special estimated tax payments to be applied	28b		
	c 2018 estimated tax payments	28c		
	d Less 2018 refund applied for on Form 4466	28d (_____)	28e	
	f Tax deposited with Form 7004	28f		
	g Credits: (1) Form 2439 ▶ _____ (2) Form 4136 ▶ _____	28g		
	h U.S. income tax paid or withheld at source (attach Form 1042-S)	28h		
	i 2018 Net 965 tax liability from Form 965-B, Part I, column (d), line 2	28i		
	j Refundable credit from Form 8827, line 8c	28j	28k	
29 Estimated tax penalty. Check if Form 2220 is attached <input type="checkbox"/>	29			
30 Amount owed. If line 28k is smaller than the total of lines 26, 27, and 29, enter amount owed	30			
31 Overpayment. If line 28k is larger than the total of lines 26, 27, and 29, enter amount overpaid	31			
32 Enter amount from line 31: Credited to 2019 estimated tax ▶ _____ Refunded ▶ _____	32			

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

Signature of officer _____	Date _____	Title _____	May the IRS discuss this return with the preparer shown below? See Instructions. <input type="checkbox"/> Yes <input type="checkbox"/> No
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Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no.			

Schedule A Dividends, Inclusions, Dividends-Received Deduction, and Other Special Deductions (see instructions)

Dividends subject to proration		(a) Dividends and inclusions	(b) %	(c) Deductions ((a) times (b))
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)	1		
2	Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)	2		
3	Dividends on certain debt-financed stock of domestic and foreign corporations	3		
4	Dividends on certain preferred stock of less-than-20%-owned public utilities	4		
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities	5		
6	Dividends from less-than-20%-owned foreign corporations and certain foreign sales corporations (FSCs)	6		
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs	7		
8	Dividends from wholly-owned foreign subsidiaries and certain FSCs	8		
9	Dividends from certain affiliated companies	9		
10	Gross dividends-received deduction. Add lines 1 through 9	10		
11	Company share percentage	11		
12	Prorated amount. Line 10 times line 11	12		
Dividends not subject to proration				
13	Affiliated company dividends	13		
14	Foreign-source portion of dividends received from a specified 10%-owned foreign corporation (excluding hybrid dividends) (see instructions)	14		
15	Dividends from foreign corporations not included on line 3, 6, 7, 8, or 14 (including hybrid dividends)	15		
16	Section 965(a) inclusion	16		
17a	Subpart F inclusions derived from the sale by a controlled foreign corporation (CFC) of the stock of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) (see instructions)	17a		
b	Subpart F inclusions derived from hybrid dividends of tiered corporations (attach Form(s) 5471) (see instructions)	17b		
c	Other inclusions from CFCs under subpart F not included on line 16, 17a, 17b, or 18 (attach Form(s) 5471) (see instructions)	17c		
18	Global intangible low-taxed income (GILTI) (attach Form(s) 5471 and 8992)	18		
19	Other corporate dividends	19		
20	Total dividends and inclusions. Add lines 1 through 19, column (a). Enter here and on Schedule B, line 2	20		
21	Section 250 deduction (attach Form 8993)	21		
22	Total deductions. Add lines 12, 13, 14, 16, 17a, and 21, column (c). Enter here and on page 1, line 21a	22		

Schedule B Investment Income (see instructions)

1	Interest (excluding tax-exempt interest)	1		
2	Total dividends and inclusions (Schedule A, line 20, column (a))	2		
3	Rents	3		
4	Royalties	4		
5	Leases, terminations, etc.	5		
6	Investment income. Add lines 1 through 5. Enter here and on page 1, line 4	6		

Schedule F Increase (Decrease) in Reserves (section 807) (see instructions)

	(a) Beginning of tax year		(b) End of tax year	
	1	2	3	4
1 Life insurance reserves				
2 Unearned premiums and unpaid losses				
3 Supplementary contracts				
4 Dividend accumulations and other amounts				
5 Advance premiums				
6 Special contingency reserves				
7 Add lines 1 through 6				
8 Increase (decrease) in reserves under section 807. Subtract line 7, column (a), from line 7, column (b)			8	
9 Tax-exempt interest and the increase in policy cash value of section 264(f) policies as defined in section 805(a)(4)(F)	9			
10 Policyholders' share percentage			10	
11 Policyholders' share of tax-exempt interest and the increase in policy cash value of section 264(f) policies as defined in section 805(a)(4)(F). Multiply line 9 by line 10			11	
12 Net increase (decrease) in reserves. Subtract line 11 from line 8. If an increase, enter here and on page 1, line 10. If a decrease, enter here and on page 1, line 2			12	

Schedule G Policy Acquisition Expenses (section 848) (see instructions)

	(a) Annuity		(b) Group life insurance		(c) Other	
	1	2	3	4	5	6
1 Gross premiums and other consideration						
2 Return premiums and premiums and other consideration incurred for reinsurance						
3 Net premiums. Subtract line 2 from line 1						
4 Net premium percentage						
5 Multiply line 3 by line 4						
6 Combine line 5, columns (a), (b), and (c), and enter here. If zero or less, enter -0- on lines 7 and 8						6
7 Unused balance of negative capitalization amount from prior years						7 ()
8 Combine lines 6 and 7. If zero or less, enter -0-						8
9 General deductions (attach statement)						9
10 Enter the lesser of line 8 or line 9						10
11 Deductible general deductions. Subtract line 10 from line 9. Enter here and include on page 1, line 18						11
12 If the amount on line 6 is negative, enter it as a positive amount. If the amount on line 6 is positive, enter -0-						12
13 Unamortized specified policy acquisition expenses from prior years						13
14 Deductible negative capitalization amount. Enter the lesser of line 12 or line 13						14
15a Tentative 60-month specified policy acquisition expenses. Enter amount from line 10, but not more than \$5 million			15a			
b Limitation			15b			
16 Phase-out amount. Subtract line 15b from line 10. If zero or less, enter -0-			16			
17a Current year 60-month specified policy acquisition expenses. Subtract line 16 from line 15a. If zero or less, enter -0-			17a			
b Enter 10% of line 17a					17b	
18a Current year 180-month specified policy acquisition expenses. Subtract line 17a from line 10			18a			
b Enter 3.34% of line 18a					18b	
19 Enter the applicable amount of amortization from specified policy acquisition expenses capitalized in prior years and deductible this year. Attach statement						19
20 Deductible policy acquisition expenses. Add lines 14, 17b, 18b, and 19. Enter here and on page 1, line 16						20

Schedule K Tax Computation (see instructions)

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120))	<input type="checkbox"/>		
2	Income tax		2	
3	Base erosion minimum tax (attach Form 8991)		3	
4	Add lines 2 and 3		4	
5a	Foreign tax credit (attach Form 1118)	5a		
b	Credit from Form 8834 (attach Form 8834)	5b		
c	General business credit (attach Form 3800)	5c		
d	Credit for prior year minimum tax (attach Form 8827)	5d		
e	Bond credits from Form 8912	5e		
6	Total credits. Add lines 5a through 5e		6	
7	Subtract line 6 from line 4		7	
8	Foreign corporations—tax on income not effectively connected with U.S. business		8	
9	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Other (attach statement)		9	
10	Total tax. Add lines 7 through 9. Enter here and on page 1, line 26		10	

Schedule L Part I—Total Assets (see instructions)

		(a) Beginning of tax year		(b) End of tax year	
1	Real property	1			
2	Stocks	2			
3	Proportionate share of partnership and trust assets	3			
4	Other assets (attach statement)	4			
5	Total assets. Add lines 1 through 4	5			

Part II—Total Assets and Total Insurance Liabilities (section 842(b)(2)(B)(i)) (see instructions)

Note: The information provided in Part II should conform with the “Assets” and “Liabilities, Surplus, and Other Funds” sections of the NAIC Annual Statement.

		(a) Beginning of tax year		(b) End of tax year	
1	Subtotals for assets	1			
2	Total assets	2			
3	Reserve for life policies and contracts	3			
4	Reserve for accident and health policies	4			
5	Liability for deposit-type contracts	5			
6	Life policy and contract claims	6			
7	Accident and health policy and contract claims	7			
8	Policyholder’s dividend and coupon accumulations	8			
9	Premiums and annuity considerations received in advance less discount	9			
10	Surrender values on canceled policies	10			
11	Part of other amounts payable on reinsurance assumed	11			
12	Part of aggregate write-ins for liabilities. (Only include items or amounts includible in “total insurance liabilities on U.S. business” as defined in section 842(b)(2)(B)(i))	12			
13	Separate accounts statement	13			
14	Total insurance liabilities. Add lines 3 through 13	14			

Schedule M Other Information (see instructions)

	Yes	No		Yes	No
1 Check accounting method: a <input type="checkbox"/> Accrual b <input type="checkbox"/> Other (specify) ▶ _____			8c The corporation may have to file Form 5472 , Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter number of Forms 5472 attached. ▶ _____		
2 Check if the corporation is a: a <input type="checkbox"/> Legal reserve company—if checked Kind of company: (1) <input type="checkbox"/> Stock (2) <input type="checkbox"/> Mutual Principal business: (1) <input type="checkbox"/> Life Insurance (2) <input type="checkbox"/> Health and accident insurance b <input type="checkbox"/> Fraternal or assessment association c <input type="checkbox"/> Burial or other insurance company			9 Does the corporation discount any of the loss reserves shown on its annual statement?		
3 Enter the percentage that the total of the corporation's life insurance reserves (section 816(b)) plus unearned premiums and unpaid losses (whether or not ascertained) on noncancelable life, health, or accident policies not included in life insurance reserves bears to the corporation's total reserves (section 816(c)) ▶ _____ %. Attach a statement showing the computation.			10a Enter the total unpaid losses shown on the corporation's annual statement: (1) For the current year: \$ _____ (2) For the previous year: \$ _____ b Enter the total unpaid loss adjustment expenses shown on the corporation's annual statement: (1) For the current year: \$ _____ (2) For the previous year: \$ _____		
4 Does the corporation have any variable annuity contracts outstanding?			11 Enter the available net operating loss carryover from prior tax years. (Do not reduce it by any deduction on page 1, line 21b.) ▶ \$ _____		
5 At the end of the tax year, did the corporation own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see section 267(c).) If "Yes," attach a statement showing (a) name and employer identification number (EIN), (b) percentage owned, and (c) taxable income or (loss) before NOL and special deductions of such corporation for the tax year ending with or within your tax year.			12a Enter the corporation's state of domicile. ▶ _____ b Was the annual statement used to prepare the tax return filed with the state of domicile? If "No," complete c below. c Enter the state where the annual statement used to prepare the tax return was filed. ▶ _____		
6 Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter name and EIN of the parent corporation. ▶ _____			13 Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement? See instructions. If "Yes," complete and attach Schedule UTP.		
7 At the end of the tax year, did any individual, partnership, corporation, estate, or trust own, directly or indirectly, 50% or more of the corporation's voting stock? (For rules of attribution, see section 267(c).) If "Yes," complete a and b below. a Attach a statement showing name and identifying number. (Do not include any information already entered in line 6 above.) b Enter percentage owned. ▶ _____			14 Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding tax years? (See section 59A(e)(2) and (3).) If "Yes," complete and attach Form 8991.		
8 At any time during the year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of stock of the corporation entitled to vote, or (b) the total value of all classes of stock of the corporation? If "Yes," enter: a Percentage owned and ▶ _____ b Owner's country. ▶ _____			15 During the tax year, did the corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions If "Yes," enter the total amount of the disallowed deductions. ▶ \$ _____		
			16 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions.		
			17 Is the corporation required to file Form 8990, Limitation on Business Interest Expense IRC 163(j), to calculate the amount of deductible business interest? See instructions.		