

207 ESA - First Installment
Estimated Insurance Premiums Tax Payment Coupon
Domestic Insurance Companies
 (Rev. 12/05)

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

207 ESA

For Calendar Year Ending

Complete form in blue or black ink only.

CT Insurance Premiums Tax Reg. No.	1	Enter 30% (.30) of the tax shown on 2005 Form 207, Line 13.	1		
	2	Enter amount from <i>Schedule 1</i> , Line 5 (on back).	2		
Date Received (DRS Use Only)	3	Enter the lesser of Line 1 or Line 2.	3		
	4	Enter overpayment from prior year applied to estimated tax for current year.	4		
Federal Employer ID Number	5	Payment due with this coupon (Subtract Line 4 from Line 3.)	5		

Please change name or mailing address, or both, if shown incorrectly at right

Due Date: March 15, 2006
Make Checks Payable To: Commissioner of Revenue Services
Mail To: Department of Revenue Services
 Processing Section
 PO Box 2990
 Hartford CT 06104-2990

207 ESB - Second Installment
Estimated Insurance Premiums Tax Payment Coupon
Domestic Insurance Companies
 (Rev. 12/05)

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

207 ESB

For Calendar Year Ending

Complete form in blue or black ink only.

CT Insurance Premiums Tax Reg. No.	1	Enter 60% (.60) of the tax shown on 2005 Form 207, Line 13.	1		
	2	Enter amount from <i>Schedule 1</i> , Line 5 (on back).	2		
Date Received (DRS Use Only)	3	Enter the lesser of Line 1 or Line 2.	3		
	4	Enter amount paid with Form 207 ESA plus overpayment from prior year applied to estimated tax for current year.	4		
Federal Employer ID Number	5	Payment due with this coupon (Subtract Line 4 from Line 3.)	5		

Please change name or mailing address, or both, if shown incorrectly at right

Due Date: June 15, 2006
Make Checks Payable To: Commissioner of Revenue Services
Mail To: Department of Revenue Services
 Processing Section
 PO Box 2990
 Hartford CT 06104-2990

207 ESC - Third Installment
Estimated Insurance Premiums Tax Payment Coupon
Domestic Insurance Companies
 (Rev. 12/05)

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

207 ESC

For Calendar Year Ending

Complete form in blue or black ink only.

CT Insurance Premiums Tax Reg. No.	1	Enter 80% (.80) of the tax shown on 2005 Form 207, Line 13.	1		
	2	Enter amount from <i>Schedule 1</i> , Line 5 (on back).	2		
Date Received (DRS Use Only)	3	Enter the lesser of Line 1 or Line 2.	3		
	4	Enter amount paid with Forms 207 ESA and 207 ESB plus overpayment from prior year applied to estimated tax for current year.	4		
Federal Employer ID Number	5	Payment due with this coupon (Subtract Line 4 from Line 3.)	5		

Please change name or mailing address, or both, if shown incorrectly at right

Due Date: September 15, 2006
Make Checks Payable To: Commissioner of Revenue Services
Mail To: Department of Revenue Services
 Processing Section
 PO Box 2990
 Hartford CT 06104-2990

207 ESD - Fourth Installment
Estimated Insurance Premiums Tax Payment Coupon
Domestic Insurance Companies
 (Rev. 12/05)

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

207 ESD

For Calendar Year Ending

Complete form in blue or black ink only.

CT Insurance Premiums Tax Reg. No.	1	Enter the tax shown on 2005 Form 207, Line 13.	1		
	2	Enter amount from <i>Schedule 1</i> , Line 5 (on back).	2		
Date Received (DRS Use Only)	3	Enter the lesser of Line 1 or Line 2.	3		
	4	Enter amount paid with Forms 207 ESA, 207 ESB, and 207 ESC plus overpayment from prior year applied to estimated tax for current year.	4		
Federal Employer ID Number	5	Payment due with this coupon (Subtract Line 4 from Line 3.)	5		

Please change name or mailing address, or both, if shown incorrectly at right

Due Date: December 15, 2006
Make Checks Payable To: Commissioner of Revenue Services
Mail To: Department of Revenue Services
 Processing Section
 PO Box 2990
 Hartford CT 06104-2990

Who Must File This Coupon

Each domestic insurance company which is carrying on an insurance business in Connecticut and whose insurance premiums tax, **after** the application of guaranty association assessment credits, Insurance Department assessment credit (if applicable), and general business tax credits (as defined in **Special Notice 2003(17)**, *2003 Legislation Affecting the Insurance Premiums Tax*), for calendar year 2006 will be \$1,000 or more must file this coupon. Other domestic insurance companies should not file this coupon.

Interest

If the payment due with this coupon is not made on or before the due date of this coupon, interest will accrue at the rate of 1% (.01) per month, or fraction of a month, on the amount not paid from the due date of this coupon until the date of payment.

Schedule 1

1	Enter estimated insurance premiums tax due for calendar year 2006 prior to the application of guaranty association assessment credits, Insurance Department assessment credit (if applicable), and general business tax credits.	00
2	Multiply Line 1 by 70% (.70).	00
3	Enter estimated Insurance Department assessment credit (if applicable), and general business tax credits against insurance premiums tax due for calendar year 2006. (May not exceed amount entered on Line 2)	00
4	Subtract Line 3 from Line 1.	00
5	Multiply Line 4 by 27% (.27).	00

207 ESA Back (Rev. 12/05)

Who Must File This Coupon

Each domestic insurance company which is carrying on an insurance business in Connecticut and whose insurance premiums tax, **after** the application of guaranty association assessment credits, Insurance Department assessment credit (if applicable), and general business tax credits (as defined in **Special Notice 2003(17)**, *2003 Legislation Affecting the Insurance Premiums Tax*), for calendar year 2006 will be \$1,000 or more must file this coupon. Other domestic insurance companies should not file this coupon.

Interest

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Schedule 1

1	Enter estimated insurance premiums tax due for calendar year 2006 prior to the application of guaranty association assessment credits, Insurance Department assessment credit (if applicable), and general business tax credits.	00
2	Multiply Line 1 by 70% (.70).	00
3	Enter estimated Insurance Department assessment credit (if applicable), and general business tax credits against insurance premiums tax due for calendar year 2006. (May not exceed amount entered on Line 2)	00
4	Subtract Line 3 from Line 1.	00
5	Multiply Line 4 by 54% (.54).	00

207 ESB Back (Rev. 12/05)

Who Must File This Coupon

Each domestic insurance company which is carrying on an insurance business in Connecticut and whose insurance premiums tax, **after** the application of guaranty association assessment credits, Insurance Department assessment credit (if applicable), and general business tax credits (as defined in **Special Notice 2003(17)**, *2003 Legislation Affecting the Insurance Premiums Tax*), for calendar year 2006 will be \$1,000 or more must file this coupon. Other domestic insurance companies should not file this coupon.

Interest

If the payment due with this coupon is not made on or before the due date of this coupon, interest will accrue at the rate of 1% (.01) per month, or fraction of a month, on the amount not paid from the due date of this coupon until the date of payment.

Schedule 1

1	Enter estimated insurance premiums tax due for calendar year 2006 prior to the application of guaranty association assessment credits, Insurance Department assessment credit (if applicable), and general business tax credits.	00
2	Multiply Line 1 by 70% (.70).	00
3	Enter estimated Insurance Department assessment credit (if applicable), and general business tax credits against insurance premiums tax due for calendar year 2006. (May not exceed amount entered on Line 2)	00
4	Subtract Line 3 from Line 1.	00
5	Multiply Line 4 by 72% (.72).	00

207 ESC Back (Rev. 12/05)

Who Must File This Coupon

Each domestic insurance company which is carrying on an insurance business in Connecticut and whose insurance premiums tax, **after** the application of guaranty association assessment credits, Insurance Department assessment credit (if applicable), and general business tax credits (as defined in **Special Notice 2003(17)**, *2003 Legislation Affecting the Insurance Premiums Tax*), for calendar year 2006 will be \$1,000 or more must file this coupon. Other domestic insurance companies should not file this coupon.

Interest

If the payment due with this coupon is not made on or before the due date of this coupon, interest will accrue at the rate of 1% (.01) per month, or fraction of a month, on the amount not paid from the due date of this coupon until the date of payment.

Schedule 1

1	Enter estimated insurance premiums tax due for calendar year 2006 prior to the application of guaranty association assessment credits, Insurance Department assessment credit (if applicable), and general business tax credits.	00
2	Multiply Line 1 by 70% (.70).	00
3	Enter estimated Insurance Department assessment credit (if applicable), and general business tax credits against insurance premiums tax due for calendar year 2006. (May not exceed amount entered on Line 2)	00
4	Subtract Line 3 from Line 1.	00
5	Multiply Line 4 by 90% (.90).	00

207 ESD Back (Rev. 12/05)

Required Annual Payment

For estimated insurance premiums tax purposes, a domestic insurance company's required annual payment is the lesser of:

- 90% (.90) of the tax shown on its 2006 Form 207 (**after** the application of guaranty association assessment credits, the Insurance Department assessment credit (if applicable), and general business tax credits); **or**
- 100% of the tax shown on its 2005 Form 207, Line 13.

Required Annual Payment

For estimated insurance premiums tax purposes, a domestic insurance company's required annual payment is the lesser of:

- 90% (.90) of the tax shown on its 2006 Form 207 (**after** the application of guaranty association assessment credits, the Insurance Department assessment credit (if applicable), and general business tax credits); **or**
- 100% of the tax shown on its 2005 Form 207, Line 13.

Required Annual Payment

For estimated insurance premiums tax purposes, a domestic insurance company's required annual payment is the lesser of:

- 90% (.90) of the tax shown on its 2006 Form 207 (**after** the application of guaranty association assessment credits, the Insurance Department assessment credit (if applicable), and general business tax credits); **or**
- 100% of the tax shown on its 2005 Form 207, Line 13.

Required Annual Payment

For estimated insurance premiums tax purposes, a domestic insurance company's required annual payment is the lesser of:

- 90% (.90) of the tax shown on its 2006 Form 207 (**after** the application of guaranty association assessment credits, the Insurance Department assessment credit (if applicable), and general business tax credits); **or**
- 100% of the tax shown on its 2005 Form 207, Line 13.