U.S. Life Insurance Company Income Tax Return

For calendar year 2017 or tax year beginning , 2017, ending , 20

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

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	, 2017, ending	, 2

OMB No. 1545-0	123
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Department of the Treasury Internal Revenue Service

 2017

<u>A</u>	Check	if:			Name								B E	nployer	identification	number			
1	Conso	solidated return Please																	
	,	nch Form 851) . Uprint Number, street, and room or suite no. If a P.O. box, see instructions.											C Date incorporated						
2		oniite (return		soll- or or															
3	Sched (Form	hedule M-3 rm 1120-L) City or town, state or province, country, and ZIP or foreign postal code									Check applicable box if an election has been made under section(s):								
E	attach Check													3(c)(3)(C)		1/-1/			
<u>-</u>														1)	s(a)			
	1 2		Gross premiums, etc., less return premiums, etc. Enter balance											2					
		10% of any decrease in reserves under section 807(f)(1)(B)(ii)												3					
ne	3																		
Income	4			•	-	, ,			4										
<u>=</u>	5					rm 1120), lii			5										
	6					ount accour		6											
	7	Other income (attach statement)												7					
_	8													8					
JS.)	9			•				· · · · ·						9					
deductions.)	10		•	•	,		-	5) (0(4)(D)(1)						10					
gnc	11		•					(f)(1)(B)(i)						11					
ģ	12							: 18e)						12					
o	13			-	•			surance, etc.,						13					
ons	14			mbursable	by taxpa	- I						1		14					
tati	15a		erest ► _			_		mpt interest ex	• —			_ c B		15c					
<u>=</u>	16		•		•	,		G, line 20)						16					
fo	17													17					
SUC	18							ent)						18					
Deductions (See instructions for limitations on	19													19					
stru	20									1 1			i .	20					
Ë.	21a							column (c))		21a				0.1					
Sec								s) (attach stater						21c					
us (22							om line 20						22					
įį	23					•		H, line 17)						23					
onp	24							btract line 23 fr						24					
De	25							9)						25					
	26							ount (Schedule						26					
	27							tructions)					•	27					
	28						1		· · ·					28					
	29a					017	T T	29a		-									
	b					nents to be ap	·	29b		-									
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эay	e	_		• • •		Form 4466	. [236 \		29f									
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Tax and Payments	h ;		edits: (1) Fo		withhald	ot course	(2) Forn	n 4136 Form 1042-S) .		29h 29i									
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	30					•							\vdash	30					
	31							ned of lines 28 and					ш	31					
									•					32					
	32				-			lines 28 and 30	, enter arrot	iiii over 	•	funded	I b -	33					
						ed to 2018 ave examined		rn, including accor	mpanying sched	dules and					owledge and b	elief, it is true			
Sig								er) is based on all in						<u> </u>	the IRS discus				
	ere	k.						1							the preparer s				
	,	Siar	nature of off	ficer				Date	- Title					(see ii	nstructions)?]Yes □ No			
_				preparer's na	ame		Prepar	er's signature	-		Date				PTIN				
Pa			21	-				-						eck 🔲 -employ	if				
	epar		Firm's name	e ▶							1	Fire	n's EIN						
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Sche	edule A Dividend Income and Dividends-Received	Dedu	uction (see instructio	ns)			
	Dividends subject to proration		(a) Dividends received	(b) %		(c) Deduction ((a) times (b))	
1	Domestic corporations, less-than-20%-owned (other than debt-					((4) 111100 (5))	
	financed stock)	1			-		
2	Domestic corporations, 20%-or-more-owned (other than debt-						
_	financed stock)	2			-		
3	Debt-financed stock of domestic and foreign corporations	3					
4	Public utility corporations, less-than-20%-owned	4			-		
5	Public utility corporations, 20%-or-more-owned	5					
6	Foreign corporations, less-than-20%-owned, and certain FSCs .	6					
7	Foreign corporations, 20%-or-more-owned, and certain FSCs .	7					
8	Wholly owned foreign subsidiaries and certain FSCs	8					
9	Certain affiliated company dividends	9					
10	Gross dividends-received deduction. Add lines 1 through 9	10			_		
11	Company share percentage (Schedule F, line 32)	11			_		
12	Prorated amount. Line 10 times line 11	12					
	Dividends not subject to proration						
13	Affiliated company dividends	13					
14	Other corporate dividends	14					
15	Total dividends. Add lines 1 through 14, column (a). Enter here						
	and on Schedule B, line 2	15					
16	Total deductions. Add lines 12 and 13, column (c). Reduce the						
	deduction as provided in section 805(a)(4)(D)(ii). Enter here and on						
	page 1, line 21a and on Schedule J, Part I, line 2c						
Sche	edule B Gross Investment Income (section 812(d)) (s		· · · · · · · · · · · · · · · · · · ·				
1	Interest (excluding tax-exempt interest)				1		
2	Total dividends (Schedule A, line 15, column (a))				2		
3	Gross rents				3		
4	Gross royalties				4		
5	Leases, terminations, etc				5		
6	Excess of net short-term capital gain over net long-term capital loss	•	,	•	6		
7	Gross income from trade or business other than an insurance business		·		7		
8	Investment income. Add lines 1 through 7. Enter here and on page 1				8		
9	Tax-exempt interest. Enter here and on Schedule F, line 13 and Sche	edule .	I, Part I, line 2d		9		
10	Increase in policy cash value of section 264(f) policies as defined						
	include on Schedule F, line 13				10		
11	Add lines 8, 9, and 10				11		
12	100% qualifying dividends				12		
13	Gross investment income. Subtract line 12 from line 11. Enter here	and o	n Schedule F, line 9		13		

Sche	edule F Increase (Decrease) in Reserves (section 807) and Company/Policyholo	der Share	Percentage
	(section 812) (see instructions)		
	(a) Beginning of ta	x year (b)	End of tax year
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	Gross investment income (Schedule B, line 13)	9	
10a	Required interest on reserves under sections 807(c)(1), (3), (4), (5), and (6) (attach		
	statement)		
b	Deductible excess interest. Enter here and on lines 18b and 19 below 10b		
С.	Deductible amounts credited to employee pension funds		
d	Deductible amounts credited to deferred annuities		
е	Deductible interest on amounts left on deposit		
	Total policy interest Add lines 10s through 10s. Enter have and an line 06 halour	104	
f 44	Total policy interest. Add lines 10a through 10e. Enter here and on line 26 below	10f	
11 12	Life insurance company gross income (see instructions)	11	
13			
13	Tax-exempt interest and the increase in policy cash value of section 264(f) policies as defined in section 805(a)(4)(F). (Enter the sum of Schedule B, line 9 and line 10.) 13		
	defined in section cooldy(4)(i). (Effect the sum of confedure B, line of directine 10.)		
14	Add lines 12 and 13	14	
15	Increase in reserves from line 8. (If a decrease in reserves, enter -0)	15	
16	Subtract line 15 from line 14	16	
17	Investment income ratio. Divide line 11 by line 16. If zero or less, enter -0	17	
18a	Policyholder dividends paid or accrued		
b	Excess interest from line 10b		
С	Premium adjustments		
d	Experience-rated refunds		
е	Deductible policyholder dividends. Add lines 18a through 18d. Enter here and on page 1, line 12	18e	
19	Deductible excess interest from line 10b		
20	Deductible dividends on employee pension funds		
21	Deductible dividends on deferred annuities		
22	Deductible premium and mortality charges for contracts paying excess interest 22		
00	Add lines 40 Abyrrych 00	00	
23	Add lines 19 through 22	23	
24	Subtract line 23 from line 18e	24	
25	Investment portion of dividends. Line 17 times line 24	25	
26	Policy interest from line 10f	26	
27	Policyholder share amount. Add lines 25 and 26	27	
28	Net investment income (see instructions)	28	
29 30	Policyholder share amount from line 27	30	
30 31	Total share percentage	31	
31 32	Company share percentage. Divide line 30 by line 28. Enter here and on Schedule A, line 11	32	<u></u> %
33	Policyholders' share percentage. Subtract line 32 from line 31	33	
34	Policyholders' share of tax-exempt interest and the increase in policy cash value of section 264(f) policies as		
U-1	defined in section 805(a)(4)(F). Multiply line 13 by line 33	34	
35	Net increase (decrease) in reserves. Subtract line 34 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.	35	

Sche	dule G Policy Acquisition Expenses (section 848) (see ins	truct	ions)				
			(a) Annui	ty	(b) Group insuranc		(c) Other
1	Gross premiums and other consideration	1					
2	Return premiums and premiums and other consideration incurred for						
	reinsurance	2					
3	Net premiums. Subtract line 2 from line 1	3					
4	Net premium percentage	4					
5	Multiply line 3 by line 4	5					
6	Combine line 5, columns (a), (b), and (c), and enter here. If zero or less, enter	-0- or	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 in					11	
12	If the amount on line 6 is negative, enter it as a positive amount. If the amour					12	
13	Unamortized specified policy acquisition expenses from prior years					13	
14	Deductible negative capitalization amount. Enter the lesser of line 12 or line					14	
15a	Tentative 60-month specified policy acquisition expenses. Enter amount from						
	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						
	zero or less, enter -0			17a			
b	Enter 10% of line 17a					17b	
18a	Current year 120-month specified policy acquisition expenses. Subtra	ct lin	e 17a from				
	line 10			18a			
b	Enter 5% of line 18a					18b	
19	Enter the applicable amount of amortization from specified policy acquisition		•				
	and deductible this year. Attach statement					19	
20	Deductible policy acquisition expenses. Add lines 14, 17b, 18b, and 19. E	ntor ba	ero and on no	10 1 li	no 16		
20	Deductible policy acquisition expenses. Add lines 14, 170, 160, and 19. E	mer ne	ne and on pa(J C I, II	IIC IO	20	Form 1120-L (2017)
							rom 1 120-L (2017)

Sche	Gule H Small Life Insurance Company Deduction (section 806) Part I—Controlled Group Inforn	<u> </u>		structi	ons)				_
	Part 1—Controlled Group Illion	IIau				Tentativ	e I ICTI		_
	Name of company			(a) Income		(b) (Lo	oss)	_
1				<u>`</u>	<u> </u>				_
2									_
3									
4									
5									
6	Add lines 1 through 5 in both columns		.						
7	Net controlled group tentative LICTI. Subtract line 6, column (b) from line 6, co Enter here and on line 11 below		` ′						
Part	Enter here and on line 11 below	hed	ule L	, Part	I, line	6, col	umn (b)),	are \$50)(
millio	n or more, complete lines 8 through 12, line 16, and enter -0- on line	17 (see ir	nstruct	ons).				
8	Gain or (loss) from operations from page 1, line 22	8							
9a		9a				-			
b		9b				-			
10a	Gain or (loss) on insurance operations. Subtract line 9a from line 8 and add	40-							
L	-	10a 10b				-			
b	· · · · · · · · · · · · · · · · · · ·	10b				-			
11		11				1			
••	The solutioned group to mative 210 million in the rest of the rest	•				-			
12	Combined tentative LICTI. Add line 10c and line 11. If \$15 million or more, skip lines 13 through 15 and enter -0- on line 17 below and on page 1, line 23	12							
13	Enter 60% of line 12, but not more than \$1,800,000					13			
14a	Maximum statutory amount	14a				-			
b	Subtract line 14a from line 12. If zero or less, enter -0	14b							
c	Enter 15% of line 14b, but not more than \$1,800,000	_			. .	14c			
15	Tentative small life insurance company deduction. Subtract line 14c from line 13 .					15			
16	Taxpayer's share. Divide line 10c by the total of line 6, column (a) and line 10c. If lin -0- on this line				s, enter	16			
17	Small life insurance company deduction. Multiply line 15 by line 16. Enter here a	ınd or	n page	1, line 2	23, and				
0 1	on Schedule J, Part I, line 2b		<u> </u>	<u></u>		17			
Sche	Edule I Limitation on Noninsurance Losses (section 806(b)(3)(C)	(S)) (SE	e ins	tructio	ns)				_
1	Noninsurance income (attach statement)					1			
2	Noninsurance deductions (attach statement)					2			
3	Noninsurance operations loss deductions					3			
4	Add lines 2 and 3					4			
5	Noninsurance loss. Subtract line 1 from line 4. If line 1 is greater than line 4, skip li -0- on line 9		5 throu	igh 8 an	d enter	5			
6	Enter 35% of line 5					6			
7	Enter 35% of the excess of LICTI (page 1, line 24) over any noninsurance loss include	led or	n page	1		7			
8	Enter the lesser of line 6 or line 7					8			
0	Limitation on poningurance losses. Cubtract line 9 from line 5. Enter have and on n		1 line	05					

Sche	edule J Part I—Shareholders Surplus Account (Stock Companies Only) (section 815)	c)) (se	e instructions)	
1a	Balance at the beginning of the tax year	1a		
b	Transfers under pre-1984 sections 815(d)(1) and (4) for the preceding year	1b		
С	Balance at the beginning of the tax year. Add lines 1a and 1b	1c		
2a	LICTI. Add lines 24 and 25, page 1. If zero or less, enter -0-	2a		
b	Small life insurance company deduction (Schedule H, line 17)	2b		
С	Dividends-received deduction (Schedule A, line 16, column (c))	2c		
d	Tax-exempt interest (Schedule B, line 9) (see instructions)	2d		
3	Add lines 1c through 2d	3		
4	Tax liability without regard to section 815. Figure the tax on line 2a as if it were total taxable income	4		
5	Subtract line 4 from line 3. If zero or less, enter -0	5		
6	Direct or indirect distributions in the tax year but not more than line 5	6		
7	Balance at the end of the tax year. Subtract line 6 from line 5	7		
Part l	II — Policyholders Surplus Account (Stock Companies Only) (section 815(d)) (see instruct	ions)		
8	Balance at the beginning of the tax year	8		
9a	Direct or indirect distributions in excess of the amount on line 5, Part I above . 9a			
b	Tax increase on line 9a			
С	Subtractions from account under pre-1984 sections 815(d)(1) and (4) 9c			
d	Tax increase on line 9c			
е	Subtraction from account under pre-1984 sections 815(d)(2)			
10	Add lines 9a through 9e, but not more than line 8. Enter here and on page 1, line 26	10		
11	Balance at the end of the tax year. Subtract line 10 from line 8	11		
Sche	edule K Tax Computation (see instructions)			
1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)) ▶ □			
2	Income tax	2		
3	Alternative minimum tax (attach Form 4626)	3		
4	Add lines 2 and 3	4		
5a	Foreign tax credit (attach Form 1118)			
b	Credit from Form 8834 (attach Form 8834)			
С	General business credit (attach Form 3800)			
d	Credit for prior year minimum tax (attach Form 8827)			
е	Bond credits from Form 8912			
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: Form 4255 Form 8611 Other (attach statement)	9		
10	Total tax. Add lines 7 through 9. Enter here and on page 1, line 28	10		

	120-L (2017)				F	Page 7
Sche	edule L Part I—Total Assets (section 806(a)(3)(C)) (see instructions)					
		(a) Beginning of tax year		(b) End of tax ye	ar
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 of controlled groups	5				
6 Part	Total assets. Add lines 1 through 5	6 (see	instructions)			
	formation provided in Part II should conform with the "Assets" and "Liabilities, Surplus, and	•	,	the N	IAIC Annual State	-ment
110 1111	omation provided in rath should comorn with the Assets and Elabilities, outplus, and) 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				

Sche	dule M Other Information (see instruction	ns)					
1	Check method of accounting:	Yes	No	8	At any time during the year, did one foreign person	Yes	No
а	Accrual b Other (specify)				own, directly or indirectly, at least 25% of (a)		
2	Check if the corporation is a:				the total voting power of all classes of stock of		
- а	Legal reserve company—if checked				the corporation entitled to vote or (b) the total value of		
а					all classes of stock of the corporation?		
	Kind of company:						
	(1) Stock (2) Mutual				and b Owner's country ▶		
	Principal business:						
	(1) Life Insurance						
	(2) Health and accident insurance			С	The corporation may have to file Form 5472,		
b	Fraternal or assessment association				Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a		
С	☐ Burial or other insurance company				U.S. Trade or Business. Enter number of Forms 5472		
					attached >		
3	Enter the percentage that the total of the				allacheu >		
Ŭ	corporation's life insurance reserves (section			9	Has the corporation elected to use its own payout		
	816(b)) plus unearned premiums and unpaid losses				pattern for discounting unpaid losses and unpaid loss		
	(whether or not ascertained) on noncancelable life,				adjustment expenses?		
	health or accident policies not included in			10	Does the corporation discount any of the loss		
	life insurance reserves bears to the corporation's				reserves shown on its annual statement?		
	total reserves (section 816(c))%.			11a	Enter the total unpaid losses shown on the		
	Attach a statement showing the computation.				corporation's annual statement:		
4	Does the corporation have any variable annuity				(1) For the current year: \$		
•	contracts outstanding?				(2) For the previous year: \$		
	G						
5	At the end of the tax year, did the corporation own,			b	Enter the total unpaid loss adjustment expenses shown on the corporation's annual statement:		
	directly or indirectly, 50% or more of the voting						
	stock of a domestic corporation? (For rules of				(1) For the current year: \$		
	attribution, see section 267(c).)				(2) For the previous year: \$		
	If "Yes," attach a statement showing (a) name and			12	If the corporation has an operations loss deduction		
	employer identification number (EIN), (b) percentage			12	(OLD) for the tax year and is electing under section		
	owned, and (c) taxable income or (loss) before NOL				810(b)(3) to forego the carryback period, check		
	and special deductions of such corporation for the tax year ending with or within your tax year.				here		
	tax year chaing with or within your tax year.				If the corporation is filing a consolidated return, the		
6	Is the corporation a subsidiary in an affiliated group				statement required by Regulations section 1.1502-21		
•	or a parent-subsidiary controlled group?				(b)(3) must be attached or the election will not be		
	If "Yes," enter name and EIN of the parent				valid.		
	corporation. ►			13	Enter the available OLD carryover from prior tax years.		
7	At the end of the tax year, did any			10	(Do not reduce it by any deduction on page 1,		
•	individual, partnership, corporation, estate, or trust				line 21b.) ► \$		
	own, directly or indirectly, 50% or more of			4.4-			
	the corporation's voting stock? (For rules of			14a	Lines the corporation 5 state of domicie		
	attribution, see section 267(c).) If "Yes," complete a						
	and b below			b	Was the annual statement used to prepare the tax		
_	Attach a statement showing name and identifying				return filed with the state of domicile?		
а	Attach a statement showing name and identifying number. (Do not include any information already				If "No," complete c below.		
	entered in 6 above.)			С	Enter the state where the annual statement used to		
	onto ou in o above,				prepare the tax return was filed ►		
b	Enter percentage owned ▶						
				15	Is the corporation required to file Schedule UTP (Form		
				10	·		
					1120), Uncertain Tax Position Statement (see instructions)?		
					If "Yes," complete and attach Schedule UTP.		