



District of Columbia
Department of Insurance, Securities and Banking

LIFE AND HEALTH INSURANCE GUARANTY FUND CLASS B ASSESSMENT RECOVERY FORM

Company Name: _____

NAIC Code: _____

Tax Year: _____

Year Assessed	Life Assessed	Life Refund	A&H Assessed	A&H Refund	Total Amount Assessed	Total Amount Refunded	Year Taken	Tax Credit (Refund) to Line 12e	Amortized Tax Credit Schedule													
2008																						
2009							2009															
2010							2010															
2011							2011															
2012							2012															
2013							2013															
2014							2014															
2015							2015															
2016							2016															
2017							2017															
2018							2018															
							2019															
							2020															
							2021															
							2022															
							2023															
							2024															
							2025															
							2026															
							2027															
							2028															

Note: Proof of payment for assessments must be attached. This form applies to **Class B Assessments** imposed by the D.C. Life and Health Insurance Guaranty Association, pursuant to D.C. Law 9-129, D.C. Official Code § 31-5410. The form must be completed and filed with the **Insurance Tax Return** by all companies taking Life and Health Guaranty Fund tax credits on the Insurance Tax Return. These include Life and Health companies, and Property and Casualty companies that write Life and Health business. **(A COMPUTER WORKSHEET MAY BE SUBMITTED IN PLACE OF THIS FORM.)**

Note: The District of Columbia allows companies to assume Life and Health Guaranty Fund tax credits through mergers or acquisitions. Any credits assumed should be added to your company's tax credits for the corresponding year of the original assessment. In addition, companies whose total Class B assessment is between \$0.10 and \$9.99 for any single year should take one single credit the following year.