## Schedule 800RET CR

## Application for Retaliatory Costs Tax Credit

## For Calendar Year 2014

Company Name					Federal Employer ID Number			
Address					NAIC/License #			
City, State and ZIP Code					State of Domicile			
1.	Retaliatory Cost paid, as defined in <i>Va. Code</i> § 58.1-2510					1.	.00	
2.	If the Retaliatory Costs Tax Credit was received for taxable year 2000, enter the amount from Line 1 multiplied by 100%						00	
3.	If the Retaliatory Costs Tax Credit was not received for taxable year 2000, enter the amount from Line 1 multiplied by 60%						.00	
4.	Retaliatory Costs Tax Credit carryover					4.	.00	
5.	Total Retaliatory Costs Tax Credit available (Add Lines 2, 3 and 4)							
6.	Ch	ck the applicable box to identify your refund.					00.	
		The amount on Line 2 is greater than 0. Your refund cannot exceed \$7,000,000. Provide details on the schedule below to allocate the credit amount available on Line 5. Attach a separate schedule if more space is needed.  The amount on Line 3 is greater than 0. Your refund cannot exceed \$800,000. Provide details on the schedule below to allocate the credit amount available on Line 5. Attach a separate schedule if more space is needed.						
		Name	FEIN	NAIC		Amount		
							.00_	
							.00_	
							.00_	
							.00_	
							.00_	
							.00_	
7.	Total Refundable Retaliatory Costs Tax Credit allocated. Enter the total from Line 6 7.						.00	
8.	Enter Refundable Retaliatory Costs Tax Credit amount allocated above and claimed on this return. Enter here and on Schedule 800CR, Line 42							
9.	Carryover Retaliatory Tax Credit. Subtract Line 7 from Line 5. This is the amount of							
	Re	taliatory Tax Credit to be c	arried forward to taxable	year 2015		9.	.00	
l cert	ify	that the above information	on is true and correct to	the best of my kno	wledge.			
Signature						Phone Number		
Title						Date		
I cer	tify	d Public Accountant Stat that the above named insi to apply for the credit for R	urance company (or grou		oany" as d	efined by <i>Va</i>	. Code § 58.1-2510 B and is	
Having an increase, as of December 31, 1997, of at least 325 qualified full-time employees above the company's elevel in Virginia on December 31, 1996;							e the company's employment	
		OR						
	Having more than 100 qualified full-time employees in Virginia during the entire taxable year, beginning on or after Ja 2001.						ginning on or after January 1,	
Signature of Authorized Representative					Pl	Phone Number		
Firm Name and Address					D	Date		