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12345 04	67890123456789012345678 FORM INS-1	8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 MAINE ESTIMATED		789012345678		<u>1</u> 5
04		PREMIUMS and/or WORK			99	+
05		INSURANC				+
07	DUE: APRIL 30, 2020	INSURANC		*173(001*	+
08						
09		ers with large annual tax liabilities				
10		on the MRS website at <u>www.mai</u>				_
11		ance tax electronically and elir	ninate the necessity of	filing Form INS-1.		_
12						_
13						+
	Company XXXXXXXXXXXXXXXXXXX		rance Premiums Tax	999999999999		+
16						-
17	Address XXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXX The first p	ayment of estimated tax	must be at least 35% of t	he total tax liability for	+
18			preceding calendar year			
19	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX XX 99999				
20		Estimated	l Payment			_
	*Signature	(from worksh	neet, line 3 below)		99999999.00	_
22	Name/Title XXXXXXXXXXXXXXXXXXX					+
23			ENCLOSE PAYMENT	•		+
	Telephone 999 999 9999					-
26			Make check payable to: 1 Mail to: Maine Revenue S			
	*Must be signed by President, Treasurer, Secretary, or Attorney-in-Fact of a Reciprocal Insurer.	Chief Accounting Officer,	P.O. Box 1065 Augusta, ME 043	22 1065		
28				venue Services, 51 Commerce	Drive Augusta MF 04330	_
29						_
30						+
32		Instructi	ons			+
33						+
34	YOU MUST MAKE ESTIMATED PAYMENTS	, UNLESS:				+
35						
36	2. Your annual tax obligation does not	exceed \$1,000.				_
37						_
38	WORKSHEET:					+
40	Line 1: First Payment Tax Estimate. (3	5% of either 2019 tax paid or 202	20 tax liability)	¢	999999999.00	+
41				ψ		+
42						+
43	Line 2: Carryover From Prior Year. Fror	m 2019 Form INS-4, line 23a. Do	not enter more than line	1 \$	99999999 .00	
44						_
45			re and also on estimate			+
46	payment line above. <i>(Must not b</i>	e less than zero)		\$	99999999 .00	+
48						+
49						+
	INTEREST & PENALTY:					Ţ
51						
52	due, unless the return is filed more than 60 da is the greater of \$25 or 25% of the tax due. The					_
53	thereof during which the failure continues to a					_
54 55						+
56	Form INS-4					+
57	File Form INS-4 by March 15, 2021 to recond due to avoid interest and penalty charges.	cile your 2020 insurance premiur	ns tax liability and estima	ated tax payments and to	o pay any additional tax	+
58						Ţ
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6789012345 5678901234567890123456789012345678901234567890123456789 12349 FORM INS-1 MAINE ESTIMATED PAYMENT for 04 05 PREMIUMS and/or WORKERS' COMPENSATION 99 06 2nd Payment 2020 **INSURANCE TAX** DUE: JUNE 25, 2020 07 08 09 Note: Certain taxpayers with large annual tax liabilities are required to remit tax payments electronically. 10 See MRS Rule 102 on the MRS website at www.maine.gov/revenue (select Laws & Rules) for details. Pay your insurance tax electronically and eliminate the necessity of filing Form INS-1. 11 12 13 14 MRS Insurance Premiums Tax 15Company 9999999999999 Account Number 16 17 Address The second payment of estimated tax must be at least 35% of the total tax liability 18 for either the preceding calendar year or the current year. 19 20 Estimated Payment 21*Signature 999999999.00 (from worksheet, line 3 below) 22 23 Name/Title 24 ENCLOSE PAYMENT 25 Telephone 999 999 9999 Make check payable to: Treasurer, State of Maine 26 Mail to: Maine Revenue Services 27*Must be signed by President, Treasurer, Secretary, Chief Accounting Officer P.O. Box 1065 28 or Attorney-in-Fact of a Reciprocal Insurer. Augusta, ME 04332-1065 Physical location: Maine Revenue Services, 51 Commerce Drive, Augusta, ME 04330 29 30 31 Instructions 32 33 YOU MUST MAKE ESTIMATED PAYMENTS, UNLESS: 34 35 You are a Risk Retention Group, or 2. Your annual tax obligation does not exceed \$1,000. 36 37 38 **39 WORKSHEET:** 999999999.00 40 41 42 43 999999999.00 Line 2: Carryover From Prior Year. From 2019 Form INS-4, line 23a. Do not enter more than line 1... \$ 44 45 Line 3: Estimated Payment. Subtract Line 2 from Line 1. Enter result here and also on estimate 46 999999999.00 payment line above. (Must not be less than zero) \$ 47 48 49 **50 INTEREST & PENALTY:** 51 For calendar year 2020, the interest rate is 7%, compounded monthly. The penalty for failure to file a return on time is the greater of \$25 or 10% of the tax due, unless the return is filed more than 60 days after the receipt of a demand notice from the state tax assessor, in which case the failure-to-file penalty 52 is the greater of \$25 or 25% of the tax due. The penalty for failure to pay a tax liability timely is 1% of the outstanding liability for each month or fraction 5 thereof during which the failure continues, to a maximum of 25% of the outstanding liability. 54 55 Form INS-4 56 File Form INS-4 by March 15, 2021 to reconcile your 2020 insurance premiums tax liability and estimated tax payments and to pay any additional tax 57 due to avoid interest and penalty charges. 58 59 60 61 62 63 64

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6789012345 FORM INS-1 MAINE ESTIMATED PAYMENT for 0405 PREMIUMS and/or WORKERS' COMPENSATION 99 06 3rd Payment 2020 **INSURANCE TAX** DUE: November 2, 2020 07 08 09 Note: Certain taxpayers with large annual tax liabilities are required to remit tax payments electronically. 10 See MRS Rule 102 on the MRS website at www.maine.gov/revenue (select Laws & Rules) for details. Pay your insurance tax electronically and eliminate the necessity of filing Form INS-1. 11 12 13 14 MRS Insurance Premiums Tax 15Company 9999999999999 Account Number 16 17 Address The third payment of estimated tax must be at least 15% of the total tax liability 18 for either the preceding calendar year or the current year. 19 20 Estimated Payment 21*Signature 999999999.00 (from worksheet, line 3 below) 22 23 Name/Title 24 ENCLOSE PAYMENT 25 Telephone 999 999 9999 Make check payable to: Treasurer, State of Maine 26 Mail to: Maine Revenue Services 27*Must be signed by President, Treasurer, Secretary, Chief Accounting Officer P.O. Box 1065 28 or Attorney-in-Fact of a Reciprocal Insurer. Augusta, ME 04332-1065 Physical location: Maine Revenue Services, 51 Commerce Drive, Augusta, ME 04330 29 30 31 Instructions 32 33 YOU MUST MAKE ESTIMATED PAYMENTS, UNLESS: 34 35 You are a Risk Retention Group, or 2. Your annual tax obligation does not exceed \$1,000. 36 37 38 **39 WORKSHEET:** 999999999.00 40 Line 1: Third Payment Tax Estimate. (15% of either 2019 tax paid or 2020 tax liability) \$ 41 42 43 999999999.00 Line 2: Carryover From Prior Year. From 2019 Form INS-4, line 23a. Do not enter more than line 1... \$ 44 45 Line 3: Estimated Payment. Subtract Line 2 from Line 1. Enter result here and also on estimate 46 999999999.00 payment line above. (Must not be less than zero) \$ 47 48 49 **50 INTEREST & PENALTY:** 51 For calendar year 2020, the interest rate is 7%, compounded monthly. The penalty for failure to file a return on time is the greater of \$25 or 10% of the tax due, unless the return is filed more than 60 days after the receipt of a demand notice from the state tax assessor, in which case the failure-to-file penalty 52 is the greater of \$25 or 25% of the tax due. The penalty for failure to pay a tax liability timely is 1% of the outstanding liability for each month or fraction 5 thereof during which the failure continues, to a maximum of 25% of the outstanding liability. 54 55 Form INS-4 56 File Form INS-4 by March 15, 2021 to reconcile your 2020 insurance premiums tax liability and estimated tax payments and to pay any additional tax 57 due to avoid interest and penalty charges. 58 59 60 61 62 63 64 65