01					
0000000111111111122222222222					
2345678901234567890123456789	0 1 2 3 4 5 6 7 8 9 0 1	23456789012 NUE SERVICE	2 3 4 5 6 7 8 9 0	12345678901234567	7 8 9 0 1 2 3
04 FORM INS-7					
	NONADMITTE				99
2018	(SELF PROCURE				
07 20+9	ANNUAL RECON	CILIATION / RETU	JRN	*1232000*	
08 09 Maine Surplus Lines Account Number		D. d.	10		
09 Maine Surplus Lines Account Number	(Do not enter producer's	Perio	od Covered	Due Date	
11 9999999999	license number.	January 1 - E	December 31	, 2018 March 15, 201	19
12	See instructions.)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
13				CHECK ALL THAT APPLY	Y.
14					
15 XXXXXXXXXXXXXXXXXXXX	XXXX			X Initial return	
16 Producer's name or name of Agency reporting on beh	alf of its producers or Self Pr	ocured Person's/Entity N	Name	Tillia Ictair	
17					
18 XXXXXXXXXXXXXXXXXXXXXX	XXXX			X Amended return	
19 Street Address and/or Post Office Box					
20				Made estimated payr	ments
21 XXXXXXXXXXXXXXXXX		<del></del>	9999	X during the year	
22 City		State ZIP	Code		
23					
24 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXX			X Change of name/ad	ldress
25 Name of Producer's Company or Employer 26				+++++++++++++++++++++++++++++++++++++++	++++
27 Check this box if reporting self procured premi	ums on line 1. X		<u> </u>	Tax Computation	
28	unis on line i. A				
291. Nonadmitted Gross Direct Insurance Premiu	ıma	1		999999999999	.00
302. DEDUCTIONS	IIIIS				.00
31 2a. Return premiums		2a		999999999999	.00
32					.00
3 3 2b. Dividends paid, credited or allowed on	direct premiums	2b		9999999999999	.00
3 4					
353. Total Deductions (line 2a plus line 2b)		3		9999999999999	.00
36					
374. Amount Taxable (line 1 minus line 3). If less	than zero, enter 0	4		999999999999	.00
38					
395. Premiums Tax (line 4 x 0.03)		5		999999999999	.00
40 416. Estimated Payments		<del></del>		9999999999999	00
4.16. Estimated Payments		6		999999999999	.00
12	ling E minus ling (C)	7		9999999999999	.00
4.37. Balance Due (If line 5 is greater than line 6,	ime 5 minus line 6)				.00
458. Overpayment (If line 6 is greater than line 5,	line 6 minus line 5)	8		999999999999	.00
469a. Portion of overpayment on line 8 to be applied					.00
47 estimated tax		9a		999999999999	.00
48					
499b. Portion of overpayment on line 8 to be refun	ded (line 8 minus line 9a)	9b		999999999999	.00
50					
51	2019 Estir		. I O TO ( - f // /	-1-14	-11
5 2 The 2019 tax payments must be on an estimated basis					
53 due for 2019. The October Installment must equal 15%	<del></del>	ND SIGNATURE	<del>                                     </del>		
				uma an inquirance subject to Maine toy	fortho
5 This return is made in compliance with the provisions of above period has been reported. Under penalties of pe					
5 7 knowledge and belief, they are true, correct and comp					
58		<del>                                      </del>	<del>                                      </del>		
5 9 Date: Signature				ne #:	
60		by the Self Procured Per	son or Producer wit	th Nonadmitted Insurance Authority.	
61 Date: Preparer Signature			IDN	Number:	
62 If enclosing a check, make check payable to: <u>Treasurer, State of Maine</u> and MAIL WITH RETURN TO: MAINE REVENUE SERVICES, P.O. BOX 1065 AUGUSTA, ME 04332-1065					
63 If not enclosing a check, MAIL TO: MAINE REVENUE SERVICES, P.O. BOX 1064 AUGUSTA, ME 04332-1064					
64				Revised December 201	8
65					
6 6					

# **GENERAL INSTRUCTIONS**

#### WHO MUST FILE

Every licensed producer and self procured person/entity that has nonadmitted gross direct insurance premiums as described in the instructions for Line 1 below must file Form INS-7. A fraternal benefit society, order, or lodge, as defined in 24-A M.R.S. section 4101(1) is exempt from Maine insurance premiums taxes.

Election to Report on Behalf of Employee Producers. An agency may elect to report and pay nonadmitted insurance premiums tax on behalf of all of its employee producers. To make this election, the agency must file an Application for Tax Registration, completing sections 1 and 11. Enter the name and federal ID number of the agency in section 1 and enter a note in section 11 stating that the agency is electing to file on behalf of its producers.

### WHEN TO FILE

The annual return and the final tax payment for 2018 are due **March 15, 2019**.

### **ESTIMATED PAYMENT OF TAX**

Insurers must make estimated tax payments for the calendar year. Required estimated payments for 2019 may be based either on the 2019 tax liability or the 2018 tax liability. April and June installments must each equal at least 35% of the 2018 total tax liability or 35% of the 2019 tax due. The October installment must equal 15% of the 2018 total tax liability or 15% of the 2019 tax due and the balance due must be submitted with the 2019 Form INS-7.

An insurance company with an annual tax liability not exceeding \$1,000 is not required to pay estimated payments.

Self-procured filers must base each estimated payment on actual premiums for the quarter.

# **INTEREST AND PENALTIES**

For calender year 2019, the interest rate is 6%, 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 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 thereof during which the failure continues, to a maximum of 25% of the outstanding liability.

### WHOLE DOLLAR AMOUNTS

Enter money items as whole dollar amounts. Drop any amount under 50 cents to the lower dollar amount and increase any amount 50 cents through 99 cents to the higher dollar amount.

### FOR INFORMATION AND FORMS

Website: www.maine.gov/revenue

Telephone: (207) 624-9753

Monday-Friday, 8 a.m.- 5 p.m.

Order Forms: (207) 624-7894

### STATUTORY REFERENCES

36 M.R.S. §§ 2512 through 2534.

### **SUPPORTING RECORDS**

Taxpayers should be prepared to provide supporting documentation for reported amounts. Adequate records must be maintained in a manner that ensures their accessibility by the State Tax Assessor for a period of at least six years.

**NOTE:** Certain taxpayers with large annual tax liabilities are required to remit tax payments electronically. See MRS Rule 102 on the MRS website at <a href="https://www.maine.gov/revenue">www.maine.gov/revenue</a> (select Laws & Rules) for details.

Maine Surplus Lines Account Number. The Maine Surplus Lines Account Number is the eleven digit identification number comprised of the producer's SSN or, if an agency is filing on behalf of its employees, the agency's federal EIN with a two digit Maine suffix. If self procured filer, enter the individual's SSN or entity EIN. The suffix will be '01' unless you are notified by MRS that a different suffix has been assigned.

#### Line 1. Nonadmitted Gross Direct Insurance Premiums.

Licensed producers, enter the gross direct premiums received from persons whose principal place of business or principal residence is in Maine and whose insured risk is entirely or partially in Maine. In addition, regardless of the location of the insured risk, enter premiums received with respect to insurance policies that meet all of the following: 1) the policy is held by a person whose principal place of business or principal residence is outside Maine; 2) none of the insured risk of the policy is located in the state of the insured's principal place of business or principal residence; and 3) the greater percentage of the insured risk of the policy is in Maine.

**Self procured persons** whose principal place of business or principal residence is in Maine and whose insured risk is entirely or partially in Maine, enter the total gross premiums received, regardless of the location of the risk. Also, regardless of the location of the risk, a self procured person whose principal place of business or principal residence is outside Maine must enter premiums received with respect to insurance policies that meet both of the following:

1) none of the insured risk of the policy is located in the state of the insured's principal place of business or principal residence; and 2) the greater percentage of the insured risk of the policy is in Maine.

A premium is an amount paid or payable for an insurance policy, including all fees (except provider fees paid for service contracts), such as membership, policy, survey, inspection, service and finance fees in consideration for an insurance policy.

**NOTE:** Agencies reporting on behalf of employee producers must attach a schedule with the name, social security number and portion of taxable premiums attributable to each producer for whom the agency is filing.

**2a.** Return premiums. Enter the amount of direct return premiums that were returned to the policyholder during the tax year. Include return premiums paid that were subject to the Maine surplus lines premiums tax in a prior year, as well as return premiums that were paid in 2018 and included on line 1.

## 2b. Dividends paid, credited or allowed on direct premiums.

Enter the amount of direct dividends paid to the policyholder during the tax year. Include dividends paid that were subject to the Maine surplus lines premiums tax in a prior year, as well as dividends that were paid in 2018 and included on line 1.

Line 6. Estimated Payments. Enter the overpayment carried forward from 2017 and any estimated payments made during 2018.

Line 9a. Portion of overpayment to be applied to next year's estimated tax. Use this line only if you want to have all or part of the overpayment on line 8 applied as an estimated payment to your 2019 Maine surplus lines premiums tax.