



1232001

Due 05/02/2016

*Surplus Lines
Account Name
Address
Contact Name
Telephone
Company/ Employer

Account Number 9999999999

(Producer SSN, or if agency is filing, its EIN, followed by the numbers 01. Self Procured filers: if individual, enter SSN; if entity, enter EIN.

Except for self procured taxpayers, the first payment of estimated tax must be at least 35% of the total tax liability for either the preceding calendar year or the current calendar year.

Estimated Payment (from worksheet, line 3 below).. 99999999 .00

*Producer name or agency reporting on behalf of producer or self procured person's/entity name. DO NOT ENTER LICENSE NUMBER.

ENCLOSE PAYMENT



Make check payable to: Treasurer, State of Maine Mail To : Maine Revenue Services P.O. Box 1065 Augusta, ME 04332-1065

INSTRUCTIONS

YOU MUST MAKE ESTIMATED PAYMENTS UNLESS:

- 1. You are a risk retention group, or
2. Your annual tax obligation does not exceed \$1,000.

All filers, including Self Procured taxpayers, are required to also file Form INS-7, Nonadmitted Premiums Tax, annual reconciliation/return.

WORKSHEET: (NOTE: Self Procured filers enter 3% [.03] of net premiums [actual gross premiums currently charged less return premiums] for this quarter on the estimated payment line above; do not complete worksheet below.)

Table with 2 columns: Description and Amount. Line 1: First Payment Tax Estimate. (35% of either 2015 tax paid or 2016 tax liability)..... \$ 99999999 .00. Line 2: Carryover From Prior Year. From 2015 Form INS-7, line 9a. Do not enter more than line 1..... \$ 99999999 .00. Line 3: Estimated Payment. Subtract line 2 from line 1. Enter result here and also on estimated payment line above..... \$ 99999999 .00

NOTE: Certain taxpayers with large annual tax liabilities are required to remit tax payments electronically. See MRS Rule 102 on the MRS web site (www.maine.gov/revenue, select Laws & Rules) for details.

INTEREST & PENALTY:

For calendar year 2016, 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 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.

STATUTORY REFERENCES

This return is made in compliance with 36 M.R.S. § 2521-A.



1232001

Due 06/27/2016

*Surplus Lines
Account Name
Address
Contact Name
Telephone
Company/ Employer

Account Number 9999999999

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STATUTORY REFERENCES

This return is made in compliance with 36 M.R.S. § 2521-A.



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Due 10/31/2016

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Account Name
Address
Contact Name
Telephone
Company/Employer

Account Number 9999999999

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