

FORM INS-6

MAINE ESTIMATED PAYMENT FOR NONADMITTED PREMIUMS TAX (SELF PROCURED & SURPLUS LINES)



99

1st Payment 2017 DUE MAY 01, 2017

1732001

Note: Certain taxpayers with large annual tax liabilities are required to remit tax payments electronically. See MRS Rule 102 on the MRS website at www.maine.gov/revenue (select Laws & Rules) for details. Pay your tax electronically and eliminate the necessity of filing Form INS-6.

*Surplus Lines Account Name XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Account Number 9999999999

Address XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

(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.

XXXXXXXXXXXXXXXXXX XX 99999

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.

Contact Name _____

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

Telephone XXXXXXXXXXXXXXXXXXXXXXXX

Company/Employer 999 999 9999

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

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

Physical location: Maine Revenue Services, 51 Commerce Drive, Augusta, ME 04330

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

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.)

Line 1: First Payment Tax Estimate. (35% of either 2016 tax paid or 2017 tax liability)..... \$ 99999999 .00

Line 2: Carryover From Prior Year. From 2016 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

INTEREST & PENALTY:

For calendar year 2017, 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.

Form INS-7

File Form INS-7, Nonadmitted Premiums Tax, annual reconciliation/return by March 15, 2018 to reconcile your 2017 Self Procured and Surplus Lines tax liability and estimated payments and to pay any additional tax due to avoid interest and penalty charges.

STATUTORY REFERENCES

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

FORM INS-6

MAINE ESTIMATED PAYMENT FOR NONADMITTED PREMIUMS TAX (SELF PROCURED & SURPLUS LINES)



99

2nd Payment 2017 DUE JUNE 26, 2017

1732001

Note: Certain taxpayers with large annual tax liabilities are required to remit tax payments electronically. See MRS Rule 102 on the MRS website at www.maine.gov/revenue (select Laws & Rules) for details. Pay your tax electronically and eliminate the necessity of filing Form INS-6.

*Surplus Lines Account Name XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Account Number 9999999999

Address XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

(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.

XXXXXXXXXXXXXXXXXX XX 99999

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.

Contact Name _____

Estimated Payment

Telephone XXXXXXXXXXXXXXXXXXXXXXXX

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

Company/Employer 999 999 9999

ENCLOSE PAYMENT

Make check payable to: Treasurer, State of Maine

Mail to: Maine Revenue Services

P.O. Box 1065

Augusta, ME 04332-1065

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

Physical location: Maine Revenue Services, 51 Commerce Drive, Augusta, ME 04330

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

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.)

Line 1: Second Payment Tax Estimate. (35% of either 2016 tax paid or 2017 tax liability) \$ 99999999 .00

Line 2: Carryover From Prior Year. From 2016 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

INTEREST & PENALTY:

For calendar year 2017, 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.

Form INS-7

File Form INS-7, Nonadmitted Premiums Tax, annual reconciliation/return by March 15, 2018 to reconcile your 2017 Self Procured and Surplus Lines tax liability and estimated payments and to pay any additional tax due to avoid interest and penalty charges.

STATUTORY REFERENCES

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

FORM INS-6

MAINE ESTIMATED PAYMENT FOR NONADMITTED PREMIUMS TAX (SELF PROCURED & SURPLUS LINES)



99

3rd Payment 2017 DUE OCTOBER 31, 2017

1732001

Note: Certain taxpayers with large annual tax liabilities are required to remit tax payments electronically. See MRS Rule 102 on the MRS website at www.maine.gov/revenue (select Laws & Rules) for details. Pay your tax electronically and eliminate the necessity of filing Form INS-6.

*Surplus Lines Account Name XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Account Number 9999999999

Address XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

(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.

XXXXXXXXXXXXXXXXXX XX 99999

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.

Contact Name _____

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

Telephone XXXXXXXXXXXXXXXXXXXXXXX

Company/Employer 999 999 9999

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

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

Physical location: Maine Revenue Services, 51 Commerce Drive, Augusta, ME 04330

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

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.)

Line 1: Third Payment Tax Estimate. (15% of either 2016 tax paid or 2017 tax liability) \$ 99999999 .00

Line 2: Carryover From Prior Year. From 2016 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

INTEREST & PENALTY:

For calendar year 2017, 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.

Form INS-7

File Form INS-7, Nonadmitted Premiums Tax, annual reconciliation/return by March 15, 2018 to reconcile your 2017 Self Procured and Surplus Lines tax liability and estimated payments and to pay any additional tax due to avoid interest and penalty charges.

STATUTORY REFERENCES

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