

# 2018 Nonadmitted Insurance Premium Tax Return for Surplus Lines Brokers

			Check if:	A a d a d Datuma	No. a stinitus D. 1					
	Name of Surplus Lines Broker			Amended Return umber	No activity Return  Date Licensed					
				inibei	Date Licenseu					
	Agency Name	ew Address Minnesota	Minnesota Tax ID Number—Required (see instructions)							
	Mailing Address	Social Sec	Social Security Number (last 4 digits)							
	City	de Contact Po	Contact Person							
	Email Address	Website Address	Daytime P	'hone	Fax Number					
	1 Total premiums (from page 2, column G)									
	3 Total gross premiums (from page 2, columns)									
	4 Total return premiums (from page 2, colu									
	5 Taxable gross premiums (subtract line 4 f			5						
	<b>6</b> Tax rate is 3% (.03)			603						
	7 Total tax (multiply line 5 by line 6)									
	8 Penalty (see instructions)									
	9 Interest (see instructions)				9					
	10 TOTAL AMOUNT DUE or (overpaid) (ad If you owe additional tax (make separat				10					
	Payment method: Electronic payment Check (payable to Minnesota Revenue; write MN tax ID number on check; attach voucher)									
	Enter amount paid Date paid  (If amount paid is different from amount due on line 10, attach an explanation.)									
	If you overpaid: overpayments will be re	funded.								
	I declare that this return is correct and compl	ete to the best of my k	nowledge and belief.							
	Signature of Broker		Date	Daytime Phone	I authorize the Minn Department of Reve					
					to discuss this tax re					

Mail to: Minnesota Revenue, Mail Station 1780, St. Paul, MN 55145-1780



# **2018 Nonadmitted Insurance Premium Tax Return for Surplus Lines Brokers** (continued)

<b>A</b> NAIC Number	<b>B</b> Name of Insurer	<b>C</b> Policy Number	D Effective Date (required)	<b>E</b> Name of Insured	<b>F</b> Trans. Type*	<b>G</b> Total Premiums	<b>H</b> All Fees/ Commissions	l Total Gross Premiums <i>(G + H)</i>	<b>J</b> Return Premiums
_									
* See "Page . column F.	2, Column instructions" for a list of	codes to enter in		al (if more than one page)					



# 2018 Form IG260 Instructions

For insurance tax laws, see Minnesota Statutes, Chapter 297I at www.leg.state.mn.us.

All surplus lines brokers that write or are authorized to write nonadmitted insurance must file Form IG260, *Semiannual Statement of Surplus Lines Insurance*, even if there is no activity or tax liability to report during the period.

(M.S. 297I.05, subd. 7).

# Filing Requirement

Effective July 21, 2011, the Nonadmitted and Reinsurance Reform Act of 2010 (NRRA) permits only the insured's home state to require the payment of premium tax for nonadmitted insurance.

When Minnesota is the home state of the insured, as provided under M.S. 297I.05, subd. 7, 100 percent of the gross premiums are taxable in Minnesota with no allocation of the tax to other states.

"Home state" means the state in which an insured maintains its principal place of business, or in the case of an individual, the individual's principal residence.

However, if 100 percent of the insured risk is located outside Minnesota, then the insured's home state is the state to which the greatest percentage of the insured's taxable premium for that insurance contract is allocated.

# Minnesota Tax ID Required

Surplus lines insurance brokers are required to have their own Minnesota tax ID number. This is not a Social Security number or agency Minnesota tax ID number.

If you don't have a Minnesota tax ID, you can apply online. Go to our website at www.revenue.state.mn.us and click "Register for a Minnesota tax ID number" on the e-Services menu. *Note:* During the process, be sure to select "Sole proprietor" as the type of legal organization. Use NAICS classification number 524210.

If you don't have access to the Internet, call 651-282-5225 or 1-800-657-3605 to register by phone.

#### **Due Dates**

File Form IG260 with all required attachments and pay any tax due by:

- Aug. 15 (for the six-month period ending June 30); and
- Feb. 15 of the following year (for the sixmonth period ending Dec. 31).

# This form must be filed even if no tax is due for the period.

The U.S. postmark date, or date recorded or marked by a designated delivery service, is considered the filing date (private postage meter marks are not valid). When the due date falls on a Saturday, Sunday or legal holiday, returns and payments electronically made or postmarked on the next business day are considered timely. When a return or payment is late, the date it is received at the Department of Revenue is treated as the date filed or paid.

**Extension for Filing Return.** If good cause exists, you may request a filing extension.

### **Rules for Using Spreadsheets**

If you are using your own spreadsheet, you must include all the information and in the same format as on page 2 of Form IG260, including subtotals on each page. Your filing will not be considered complete if all information, including subtotals, is not included

If you have more than two pages of surplus lines insurance, submit an electronic file in addition to the printout. The files must be in a Microsoft Excel format.

# **Payments**

### **Electronic Payments**

If your total insurance taxes and surcharges for the last 12-month period ending June 30 is \$10,000 or more, you are required to pay your tax electronically in all subsequent years.

You must also pay electronically if you're required to pay *any* Minnesota business tax electronically, such as withholding tax.

To pay over the Internet, go to the department's website at www.revenue.state.mn.us and login. If you don't have Internet access, call 1-800-570-3329 to pay by phone. You'll need your user name, password and bank routing and account numbers. When paying electronically, you must use an ac-

count that is not associated with any foreign banks.

If you use other electronic payment methods, such as ACH credit method or Fed Wire, instructions are available on our website or by calling our Business Registration Office at 651-282-5225 or 1-800-657-3605.

Submit separate payments for each return.

# **Check Payments**

If you're not required to pay electronically and are paying by check, visit our website at **www.revenue.state.mn.us** and click on "Make a Payment" and then "By check" to create a voucher. Print and mail the voucher with a check made payable to Minnesota Revenue.

When you pay by check, your check authorizes us to make a one-time electronic fund transfer from your account, and you may not receive your canceled check.

# How to Complete the Form Complete page 2 before page 1 of Form IG260.

#### Page 2, Column Instructions

#### A. NAIC Number

Enter the NAIC number.

#### B. Name of Insurer

List the insurers. Include policies for insurance companies without NAIC numbers.

# C. Policy Number

The policy number (modified by the month and year that the policy was issued) is the controlling number for reporting surplus lines policies and any subsequent activity during the policy period, i.e., endorsements, audits and/or cancellations.

#### D. Effective Date (required)

Enter the effective date of the transaction.

#### E. Name of Insured

Provide the name of the insured.

#### F. Policy Transaction Type

Enter one of the following numbers:

1 = New business4 = Audit2 = Renewal5 = Reinstatement3 = Cancellation6 = Endorsement

# **G. Total Premiums**

Include all premiums paid by companies with a home state of Minnesota for risks

Continued

located in the United States and U.S. territories.

# H. Total Fees and Commissions (excluding stamping fee)

Include all fees and commissions paid by policyholder to obtain coverage that are not included in premiums.

#### **I. Total Gross Premiums**

Total premiums and all fees and commissions (column G plus column H).

#### J. Return Premiums

Enter all return premiums. Include a note indicating on which return the original policy was reported. Return premiums can only be claimed by the broker where the premiums and taxes were originally reported.

### Page 1, Line Instructions

### **Check Boxes**

At the top of the form, check if the return is:

- an Amended Return: Check only if you are amending a previously filed return for the same period. Include all original and corrected policies on the amended return.
- a No Activity Return: Check only if you did not have any activity during the period.

# **Line 4 — Total Return Premiums**

Enter all return premiums as a positive number.

#### Line 5 — Taxable Gross Premiums

Gross premiums include fees and commissions.

# Line 8 — Penalty

Late Payment. If you don't pay all the tax due by the due date, a late payment penalty is due. The penalty is 5 percent of the unpaid tax for any part of the first 30 days the payment is late, and 5 percent for each additional 30-day period, up to a maximum of 15 percent.

Late Filing. Add a late filing penalty to the late payment penalty if your return is not filed by the due date. The penalty is 5 percent of the unpaid tax. When added to the late payment penalty, the maximum combined penalty is 20 percent.

**Payment Method.** If you are required to pay electronically and do not, an additional 5 percent penalty applies to payments not made electronically, even if a paper check is sent on time.

#### Line 9 — Interest

You must pay interest on the unpaid tax plus penalty from the due date until the total is paid. The interest rate for calendar year 2018 is 4 percent. The interest rate may change for future years.

To figure how much interest you owe, use the following formula with the appropriate interest rate:

Interest =  $(tax + penalty) \times \# of days late \times interest rate ÷ 365$ 

# Business Information Changes

Be sure to let us know within 30 days if you change mailing addresses, phone numbers, or any other business information. To do so, go to our website, login to e-Services and update your profile information. By notifying us, we will be able to let you know of any changes in Minnesota tax laws and filing requirements.

#### Information and Assistance

Website: www.revenue.state.mn.us Email: insurance.taxes@state.mn.us

Phone: 651-556-3024

This material is available in alternate formats.

For questions about licensing and regulations, contact the Minnesota Department of Commerce:

Website: www.mn.gov/commerce Email: licensing.commerce@state.mn.us Phone: 651-539-1599 or 1-800-657-3978

Fax: 651-539-0107

For questions about stamping fees, contact the Surplus Lines Association of

Minnesota (SLAM):

Website: www.mnsla.com Email: nschroeder@mnsla.com

Phone: 320-679-4244