



Due 05/02/2016

1232001

*Surplus Lines
Account Name

Address

Contact Name

Telephone

Company/
Employer

Account Number

(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) ..

.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.)

Line 1: First Payment Tax Estimate. (35% of either 2015 tax paid or 2016 tax liability)..... \$	<input type="text"/>	.00
Line 2: Carryover From Prior Year. From 2015 Form INS-7, line 9a. Do not enter more than line 1..... \$	<input type="text"/>	.00
Line 3: Estimated Payment. Subtract line 2 from line 1. Enter result here and also on estimated payment line above..... \$	<input type="text"/>	.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

(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) ..

.00

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

ENCLOSE PAYMENT



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P.O. Box 1065
Augusta, ME 04332-1065

INSTRUCTIONS

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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.)

Line 1: First Payment Tax Estimate. (35% of either 2015 tax paid or 2016 tax liability)..... \$	<input type="text"/>	.00
Line 2: Carryover From Prior Year. From 2015 Form INS-7, line 9a. Do not enter more than line 1..... \$	<input type="text"/>	.00
Line 3: Estimated Payment. Subtract line 2 from line 1. Enter result here and also on estimated payment line above..... \$	<input type="text"/>	.00

NOTE: Certain taxpayers with large annual tax liabilities are required to remit tax payments electronically.
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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 10/31/2016

*Surplus Lines
Account Name

Address

Contact Name

Telephone

Company/
Employer

Account Number

(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) ..

.00

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

ENCLOSE PAYMENT



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Mail To : Maine Revenue Services
P.O. Box 1065
Augusta, ME 04332-1065

INSTRUCTIONS

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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.)**

Line 1: First Payment Tax Estimate. (15% of either 2015 tax paid or 2016 tax liability)..... \$	<input type="text"/>	.00
Line 2: Carryover From Prior Year. From 2015 Form INS-7, line 9a. Do not enter more than line 1..... \$	<input type="text"/>	.00
Line 3: Estimated Payment. Subtract line 2 from line 1. Enter result here and also on estimated payment line above..... \$	<input type="text"/>	.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.