

State of Idaho
DEPARTMENT OF INSURANCE

C.L. "BUTCH" OTTER
Governor

700 West State Street, 3rd Floor
P.O. Box 83720
Boise, Idaho 83720-0043
Phone (208)334-4250
FAX # (208)334-4398

DEAN L. CAMERON
Director

**INSTRUCTIONS FOR COMPLETING AND FILING
QUARTERLY PREPAYMENT OF ANNUAL PREMIUM TAXES**

Idaho Code, § 41-402 (3)(a) requires prepayment of premium tax if the sum of the tax for the prior calendar year's business was **\$400 or more**. Prepayments shall be based on the *preceding calendar year's business* at the **current year's premium tax rate**. Companies writing dental insurance not governed by Chapter 34, Title 41, Idaho Code see changes below (**)

NOTE: Any insurer failing to postmark on or before the due date, the Premium Tax Quarterly Prepayment Installment form and tax remittance, shall be liable for a penalty of \$25 for each day of delinquency.

1. (**)Companies who wrote dental premiums (not governed by chapter 34, Title 41, Idaho Code) need to take all dental premiums out of the net taxable premiums (B1). On July 1, 2007, Idaho Code 41-402(9) changed the tax on dental from premium based to \$.04 per number of insureds, certificate holders, or blanket policy participants per month for the full year. (See form sections, A1, A2 and A3)

For prepayments without the dental premium adjustment, use instructions listed below:

Enter net taxable premiums, not including fees, from prior year's Statement of Premium Taxes and Fees

(B1): **ROUND ALL NUMBERS TO THE NEAREST DOLLAR, NOT REQUIRED TO REPORT CENTS.**

- Life & Health Insurers use Page 7, Schedule E, Column A, total of Line 1 **plus** Line 2
- Property & Casualty Insurers use Page 8, Schedule E, Column A, total of Line 1 **plus** Line 2
- Insurer's Using Health Blank use Page 9, Schedule E, Column A, Line 1 **plus** Lines 2 and 3
- Risk Retention Groups use Page 3, Schedule B, Column A, Line 1
- Title Companies use Page 3, Schedule C, Column A, Line 1

2. To calculate Estimated Tax, multiply the total shown in B1. by applicable tax rate:

Calendar Year 2016 premium tax rate is: 1.50%.

Enter net Idaho taxable premiums, not including fees, from prior year's Statement of Premium Taxes and Fees

3. Multiply the Estimated Tax shown in B2 by the appropriate percentage in B3:

- 60% - due June 15, 2016
- 20% - due September 15, 2016
- 15% - due December 15, 2016

4. **Prepayments with dental premium adjustment:** Do not include written dental premium in B1. Use dental contract information reported on Schedule D to calculate dental prepayment in A1.

Make check payable to: IDAHO DEPARTMENT OF INSURANCE (Your canceled check is your receipt). There will be a \$20.00 charge on all returned checks - Idaho Code § 28-22-105.

Prior tax overpayments cannot be deducted as refunds checks are issued.

Changes in company status such as mergers, name or addresses must be reported.

Companies in receivership must provide legal documentation that precludes prepayment of premium taxes.

REQUIRED

Separate payments for each company

Signature and title of officer

Payments of \$100,000 or more MUST be paid by Electronic Funds Transfer-Automated Clearing House Method.

Contact the Premium Tax Section to get information on how to register for electronic payments. Indicate if payment is sent by Electronic Fund Transfer (EFT) under LINE A3.