

## INSTRUCTIONS FOR COMPLETING AND FILING STATEMENT OF PREMIUM TAXES AND FEES TITLE INSURANCE COMPANIES

1. Read these instructions carefully before completing this fee statement. If there are any questions regarding this filing, please contact the Premium Tax Section at (208) 334-4281, or [premiumtax@doi.idaho.gov](mailto:premiumtax@doi.idaho.gov).
2. The Idaho Department of Insurance has adopted a mandatory e-file policy. All tax and fee filings must be submitted electronically. Electronic filings must be submitted by one of the following methods:
  - ❖ Premium Pro software, or
  - ❖ Directly through TriTech at <https://nonsub.tritechsoft.com/#/recaptcha> .
  - ❖ To access the correct form, make the following choices: IDAHO, 2024, TITLE.
3. Payments must be submitted by one of the following methods:
  - ❖ Check with TriTech payment voucher, or
  - ❖ Electronic Fund Transfer (EFT). **ACH Credit and Wire Transfers are acceptable. MUST BE ENROLLED TO USE EFT PAYMENT OPTION.** Idaho does NOT accept ACH Debit or OPTins. Payment CANNOT be made through TriTech.

To enroll in the Electronic Fund Transfer payment system, please complete the EFT Enrollment Form located on the Idaho Department of Insurance website at [https://doi.idaho.gov/wp-content/uploads/Company/EFT\\_Enrollment.pdf](https://doi.idaho.gov/wp-content/uploads/Company/EFT_Enrollment.pdf) , and submit it to the Premium Tax Section at [premiumtax@doi.idaho.gov](mailto:premiumtax@doi.idaho.gov) . Enrollments are not processed from February 14 to July 1 due to tax filing volume.
  - ❖ Unidentifiable payments will be returned.
4. Annual Continuation Fee Statements and Continuation Fees are due **on or before** March 1st. Failure to pay the ACF by March 1 each year will result in the expiration of the insurer's, or other entity's, authority to do business in Idaho.
5. All licensed Title insurance companies are required to file an Annual Statement of Premium Taxes and Fees and pay the associated tax and fee **on or before** March 1<sup>st</sup>. The statement is due, and taxes and fees are payable, regardless of whether business was written in Idaho. Idaho Code § 41-335, IDAPA 18.01.02.020.01, IDAPA 18.01.02.020.02, IDAPA 18.01.02.021.
6. Failure to file or pay amounts due will result in penalties of \$25 per calendar day beginning March 2<sup>nd</sup>, up to and including the day the electronic filing is submitted, and the payment is postmarked or settled. Failure to pay the continuation fee will result in expiration of Certificate of Authority on March 31<sup>st</sup>. Idaho Code §41-404.
7. **All sections of the form must be completed, or the form will be rejected.**
8. Any questions or correspondence concerning the fee statement will be directed to the contact person listed on the statement. Include a **direct telephone number with extension and e-mail address.** If

the contact person changes after the submission of the statement, please contact the Premium Tax Section as indicated in item number 1.

## 9. PAGE 1 – STATEMENT OF PREMIUM TAXES AND FEES

### RECAP OF TAXES AND FEES

**Enter the company information**--enter the company's NAIC Number in the box provided. The company name, address, and state of domicile must be completed on all tax forms, as refunds and correspondence will be sent to this address.

- A. **Line 1. Tax Liability.** Calculated total. (Schedule C, Line 4, greater of Column A or B).
- B. **Line 2. Prepayments.** Enter the amounts of quarterly prepayments. If the return is an AMENDED RETURN, enter the amount of tax paid with the original return on Line 2(4).
- C. **Line 3. Tax Due.** Calculated total of Line 1 - Line 2. If estimated quarterly prepayments paid toward the tax obligation exceed the total premium tax amount due for the calendar year, **you must still submit payment of required Continuation Fee.** If the amount on Line 3 is an overpayment (negative amount), this same amount should be carried forward to Line 6-Refund Due for Tax Overpayment. Any refund due for the overpayment of premium taxes will be mailed to the company address on the tax statement after your company's statement has been audited. Tax overpayments cannot be applied toward fees or future quarterly tax payment obligations. Idaho Code § 41-402(10).
- E. **Line 4. Annual Continuation Fee.** Idaho Code § 41-324 and IDAPA 18.01.02.
  - a. Enter the amount of surplus as stated on the NAIC Annual Statement, *Liabilities, Surplus and Other Funds* Page 3, Line 32, Column 1.
  - b. Amount of Continuation Fee is auto calculated based on the amount of surplus entered on Line 4(a). Payment of the required fee **MUST** be included. If the required fee is not being paid, you **must attach a written explanation.**
- F. **Line 5 - Amount Enclosed.** Calculated total. Overpayment of tax may not be used to offset fees or penalties. **Do not apply tax overpayment to the payment of fees. Payment of required continuation fee must be enclosed.**
  - a. If a refund of premium tax is due on line 3 (also negative amount of Line 6), enclose payment for Line 4. (continuation fee)
  - b. If there is premium tax due on Line 3, enclose payment for the total of Lines 3 + 4 (tax due and continuation fee).
- G. **Line 6. Refund Due.** This is the negative tax amount on Line 3. Per Idaho Code § 41-402A. Refunds. "Where there has been an overpayment of any taxes, fines or penalties due under this chapter, the director is authorized to refund all such taxes, fines or penalties erroneously or illegally collected or paid. No such refund shall be paid after one (1) year from the due date of the statement required in section 41-402(4), Idaho Code, unless before the expiration of such period a written claim is filed therefore by the insurer on such forms and in such manner as is prescribed by the director."
- H. For all electronic filings, the typed name of the company officer signing under oath is acceptable. By the appropriate signature, being duly sworn under oath, it is declared that the premium tax report is a complete, true, and correct statement of all premiums and fees on business written by said company for the reporting year on insurance, property, or risks resident, or located, in Idaho. **Unsigned forms will be considered incomplete and rejected.**

- I. All questions concerning the tax statement will be directed to the contact person as stated on page 1 of the tax statement. Include a **direct telephone number with extension and an e-mail address**. If the contact person changes after the submission of the *Statement of Premium Taxes and Fees*, please contact the Premium Tax Section as indicated in item #1.

#### 10. PAGE 2 - SCHEDULE A - COMPUTATION OF PREMIUM TAX - IDAHO BASIS

- A. **Line 1. Direct Premiums Written.** Enter Direct Premiums Written. This should match the NAIC Annual Statement, Schedule T, Line 13, Columns 3+4+5. A complete explanation of any differences between the NAIC Annual Statement Idaho *Exhibit of Premiums and Losses*, NAIC Annual Statement Schedule T, and the tax statement must be submitted and signed by the person authorized by the company to prepare this statement.
- B. **Line 2. Amount Paid to or Retained by Agent.** This number should match the NAIC Annual Statement, State Business Page, Line 6, Column 5. **DO NOT enter a negative number on this line.** The subtraction is calculated on Line 3.
- C. **Line 3. Net Taxable Premium – Risk Portion.** Direct written premium LESS amounts retained by agent. Idaho Code §41-402 (1) (b) states “As to title insurance “gross premium” means the insurance risk portion of the amount charge for title insurance”.
- D. **Line 4. Premium Tax.** Calculated by multiplying line 3 by 1.5% (.015).

#### 11. PAGE 2 – SCHEDULE B – COMPUTATION OF PREMIUM TAX – STATE OF DOMICILE BASIS

- A. **Line 1. Identify the Specific Basis For Calculating The Title Premiums Risk Portion.** This may be a Statute, Regulation, Rule, Bulletin, etc.
- B. **Line 2. Direct Premiums Written.** Report premiums as if your company was an Idaho insurer writing an identical volume of business in your state of domicile.
- C. **Line 3. Deductions Allowed By Domicile State.** Enter deductions allowed by domicile state. **Attach a complete explanation of any deductions from the premiums reported on Line 2, (i.e., agents’ retention, national risk rate percentage, etc.).**
- D. **Line 4. Net Taxable Premiums.** Calculated Line 2 – Line 3.
- E. **Line 5. Tax Rate.** Enter tax rate for domicile state.
- F. **Line 6. Premium Tax.** Calculated total. Multiply Line 4 by Line 5.

#### 12. PAGE 3 - SCHEDULE C - COMPUTATION OF RETALIATORY TAXES. This schedule determines the higher aggregate of taxes due. For audit verification, we may be contacting the various state insurance departments, using copies of the domicile state tax statements, the NAIC Retaliatory Guide, or domiciliary code. Idaho Code § 41-340(2) and (3)

- A. Taxes should be calculated on the retaliatory basis of what an Idaho company, doing the identical volume of business, would be required to pay to your state of domicile. **A RETALIATORY TAX CALCULATION WORKSHEET MUST BE ATTACHED.** **DO NOT** use the Idaho Retaliatory Tax Worksheet (Schedule C) as retaliatory support.
- B. **Column A** is calculated from other schedules.
- C. **Column B, Line 1. Title Premiums.** Amount entered is the amount from Schedule B, Line 4. Attach an explanation of any difference between Column A and Column B.

- D. **Column B, Line 1A. Title Tax Rate.** Enter the premium tax rate of the domiciliary state.
- E. **Column B, Line 1B. Premium Tax.** Calculated field. Multiply Column B, Line 1 by the rate in Column B, Line 1A.
- F. **Column B, Line 2. Municipal, City, or County Premiums.** Enter the municipal, city, and county taxable premiums per the domiciliary state.
- G. **Column B, Line 2A. Municipal, City, or County Tax Rate.** Enter the premium tax rate of the appropriate taxing entity in the domiciliary state.
- H. **Column B, Line 2B. Municipal, City, or County Premium Tax.** Multiply Column B Line 2 by the rate in Column B, Line 2A.
- I. **Line 3, Column B. Other Taxes. Corporate/Income/Excise Tax MUST be stated, even if zero.** All other taxes imposed by your state of domicile, including state-imposed income/excise/corporate/minimum/fire tax on foreign insurers must be reported **except**:
- Ad valorem taxes on real or personal property.
  - Personal income, capital or surplus taxes.
  - Taxes imposed for special purpose obligations or assessments on particular kinds of insurance.
- J. **Line 4. Total Taxes.** Calculated total (Add Line 1B, 2B, and 3 for Column A and B).

**An explanation of retaliatory calculations will be requested for any discrepancies.**