

STATE OF NEBRASKA
 DEPARTMENT OF INSURANCE
 ANNUAL TAX RETURN FOR YEAR ENDING DECEMBER 31, 2018

Domestic Assessment Insurers

COMPANY INFORMATION	
NAIC Number	
Contact Person	
E-Mail Address	
Federal Tax I.D. Number	
Telephone	
Company Name	
Street Address	
City	
State	
Zip Code	
Organized Under the Laws of	NE

TYPE OF INSURER:	Assessment
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FOR ALL 2018 TAX FILINGS - ALL NUMERIC FIELDS MUST CONTAIN A NUMERIC VALUE. IF A PARTICULAR FIELD IS NOT APPLICABLE PLEASE ENTER THE NUMBER 0 (ZERO).

SECTION II - PREMIUM TAX

GROUP ACCIDENT AND HEALTH PREMIUMS		
1	Gross direct premiums received on Nebraska business	
2	Credit (group) premiums received on Nebraska business	
3	Gross direct premiums received for insurance written outside of the State of Nebraska where no comparable tax is paid by the direct writing company to any other appropriate taxing authority	
4	Dividends paid or credited to policyholders	
5	Net taxable premiums (Line 1 plus Line 2 plus Line 3 minus Line 4)	0
6	Tax rate applicable	0.005000
7	Tax (Multiply Line 5 by Line 6)	0

CREDIT INDIVIDUAL & ALL OTHER ACCIDENT AND HEALTH PREMIUMS		
8	Gross direct premiums received on Nebraska business (Medicare Part D premiums not taxed)	
9	Gross direct premiums received for insurance written outside of the State of Nebraska where no comparable tax is paid by the direct writing company to any other appropriate taxing authority	
10	Dividends paid or credited to policyholders	
11	Net taxable premiums (Line 8 plus Line 9 minus Line 10)	0
12	Tax rate applicable	0.010000
13	Tax (Multiply Line 11 by Line 12)	0

ALL OTHER PREMIUMS		
14	Gross direct premiums received on Nebraska business	
15	Gross direct premiums received for insurance written outside of the State of Nebraska where no comparable tax is paid by the direct writing company to any other appropriate taxing authority	
16	Dividends paid or credited to policyholders	
17	Net taxable premiums (Line 14 plus Line 15 minus Line 16)	0
18	Tax rate applicable	0.010000
19	Tax (Multiply Line 17 by Line 18)	0
20	Net premium tax (Line 7 plus Line 13 and Line 19)	0

SECTION III - FIRE INSURANCE TAX					
A	B	C	D	E	F
Line of Business	Total Direct Premiums	Less Dividends	Net Direct Premiums	Percent of Fire	Fire Tax Premium
Fire			0	100%	0
Crop Hail			0	1%	0
Farmowners M.P.			0	45%	0
Homeowners M.P.			0	34%	0
Commercial M.P. (See Note 1 Below)			0	50%	0
Ocean Marine			0	10%	0
Inland Marine			0	15%	0
Auto Physical Damage			0	8%	0
Aircraft			0	10%	0
Other			0		0

Note 1: Line 5.1 from the Direct Business Page (non-liability portion)

21	Total taxable premium	0
22	Tax rate applicable	0.003750
23	Fire insurance tax (Multiply Line 21 by Line 22. <u>IF LESS THAN ZERO, ENTER ZERO</u>)	0

SECTION IV - FEES		
24	Renewal of Certificate of Authority (Assessment associations which do business in less than 31 counties \$20.00; all other \$100.00)	
25	Filing Annual Statement	200
26	Insurance Fraud Fee (if applicable)	
27	Other Fees (if applicable)	
28	Total fees (sum of lines 24 through 27)	200

SECTION V – SUMMARY OF TAXES AND FEES

29	Premium tax (Line 20)	0
30	Fire insurance tax (Line 23)	0
31	Fees (Line 28)	200
32	Total taxes and fees (Sum of Lines 29 through 31)	200
33	Prepayments (April 15, June 15, September 15; payments and applied credits)	
34	Unapplied credit balance	
35	Total prepayments and unapplied credits (Line 33 plus Line 34)	0
36	Balance due (If Line 32 is greater than Line 35, enter amount. Enclose payment of this amount).	200
37	Overpayment (If Line 35 is greater than Line 32, enter amount here)	0
38	Amount to be refunded	
39	Amount to be credited to 2019 prepayment	0

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