

NEBRASKA DEPARTMENT OF INSURANCE

QUARTERLY TAX RETURN/TAX YEAR 20aa

PAYMENT DUE: _____ APRIL 15 _____ JUNE 15 _____ SEPTEMBER 15

COMPANY INFORMATION

Nebraska Co. I.D. No.	Contact Person
NAIC No.	E-Mail Address
Federal Tax I.D. No.	Telephone

Company Name _____

Street Address _____

City _____ State _____ Zip Code _____

UGNGEV'GKJ GT'VJ G'RTKQT'[GCT'QT'GUVKO CVGF 'EWTGTP V[GCT'DCUKU'**THE METHOD SELECTED MUST BE USED FOR THE ENTIRE TAX YEAR.**

PRIOR YEAR BASIS

30'	, Rtlqt "{ gct 'r tgo kwo 'cz "	"	"
40'	Gpvt "47' "qh'Nkpg"3"	"	"

CURRENT YEAR BASIS

50'	Guko cvgf 'ewtgpv' { gct'q'vqcn'r tgo kwo 'cz 'hcdk'k' "	"	"
60'	Gpvt "qpg'hqwtj '*3 16+'qh': 2' "qh'Nkpg"5"	"	"

AMOUNT DUE

70'	S wctvgt' 'r tgo kwo 'cz 'kpu'cmo gpv'*gpvt "co qwpv'htqo "Nkpg" 4"qt'Nkpg"6+"	"	"
80'	F gf wev'etgf k'cmqy gf 'hqt 'r tgxkqu'qxgtr c { o gpv'	"	"
90'	P gv'r tgo kwo 'cz 'f wg"	"	"

***Companies whose prior year premium tax liability is less than four thousand dollars are not required to file quarterly tax returns**