NEAR FINAL DRAFT 8/3/20

DEPARTMENT OF REVENUE

M11AR
Attachment #2

2020 Fire Insurance Tax *(Retaliatory Schedule)*

Due March 1, 2021

Check if: [X] Amended Return [X] No Activity Return

Name of Insurance Company	NAIC Number	Minnesota Tax ID *(required)*	State/Country of Incorporation
NAMEXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	1234567890	1234567890	XXXXXXXXXXXXX

Complete this form if your state of incorporation collects a fire insurance tax.

Note: *Numbers in parentheses refer to line numbers on NAIC Minnesota state page. Also include all finance and service charges.*

		A Total Direct	B Dividends	C Net Direct Premiums (A minus B)	D % of Fire	E State of Incorporation Basis (C times D)
1	Fire (1) 1	123456789	123456789	123456789	12345	123456789
2	Allied lines					
	a Crop (2.1) 2a	123456789	123456789	123456789	12345	123456789
	b Other than crop (2.1) 2b	123456789	123456789	123456789	12345	123456789
3	Multi-peril					
	a Farmowners (3) 3a	123456789	123456789	123456789	12345	123456789
	b Homeowners (4) 3b	123456789	123456789	123456789	12345	123456789
	c Commercial nonliability (5.1) 3c	123456789	123456789	123456789	12345	123456789
	d Commercial liability (5.2) 3d	123456789	123456789	123456789	12345	123456789
4	Inland marine (9) 4	123456789	123456789	123456789	12345	123456789
5	Ocean marine (8) 5	123456789	123456789	123456789	12345	123456789
6	Earthquake (12) 6	123456789	123456789	123456789	12345	123456789
7	Auto physical damage (21.1-21.2) (total commercial and private) OR itemize combined auto comprehensive fire premiums *(lines 7a–7f)* 7	123456789	123456789	123456789	12345	123456789
	a Comprehensive fire, theft and miscellaneous (exclude collision) 7a	123456789	123456789	123456789	12345	123456789
	b Comprehensive fire, theft and miscellaneous with deductible (exclude collision) 7b		123456789	123456789	12345	123456789
	c Fire and theft combined 7c	123456789	123456789	123456789	12345	123456789
	d Fire, theft and miscellaneous 7d	123456789	123456789	123456789	12345	123456789
	e Fire 7e	123456789	123456789	123456789	12345	123456789
	f Collision and others 7f	123456789	123456789	123456789	12345	123456789
8	Aircraft physical damage (22) 8	123456789	123456789	123456789	12345	123456789
9	Other fire *(itemize on a separate schedule)* 9	123456789	123456789	123456789	12345	123456789

10	Taxable fire premiums *(add lines 1 through 9, column E)* 10	123456789
11	Percentage rate for fire in the state/country of incorporation 11	12345678 %
12	Fire insurance tax liability *(multiply line 10 by the percentage on line 11)* ..... 12 Enter on Form M11, line 18, Column A.	123456789

Attach this form when you file your Form M11. Keep a copy for your records.