NEAR FINAL DRAFT 8/3/26

DEPARTMENT OF REVENUE

M11AR

2026 Fire Insurance Tax *(Retaliatory Schedule)*

Due March 1, 2027

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

Name of Insurance Company	NAIC Number	Minnesota Tax ID *(required)*	State/Country of Incorporation
NAMEXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	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** 123456789

Enter on Form M11, line 18, Column A.

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

2026 Form M11AR Instructions

Use this form to determine the correct amount of premiums collected for all fire, sprinkler and lightning damage. Use these instructions as a guide. For further information, see M.S. 297I. The purpose of this form is to collect retaliatory tax on fire insurance premiums.

Be sure to include this form when you file your Form M11.

Filing Requirements

All insurers that write or are authorized to write fire insurance in Minnesota must file Form M11AR if their home state collects a fire insurance tax. This schedule is not required for companies domiciled in **Minnesota, Arizona, Hawaii, Massachusetts, New York and Rhode Island.** *(M.S. 297I.05, subd. 11)*

File Electronically

This schedule (Form M11AR) may be filed electronically using TriTech Software.

Instructions

Check Boxes

At the top of the form, check if the return is:

- an **Amended Return**: Check only if you are amending a previously filed return for the same period. Include all original and corrected premiums on the amended return.
- a **No Activity Return**: Check only if you did not sell any insurance that had fire, lightning or sprinkler leakage coverage for the year.

Line Instructions

Premiums include finance, service or other charges paid to the insurers.

Line 1

Enter all fire premiums written (line 1, Minnesota state page).

Lines 2a and 2b

Enter all crop premiums written for allied lines on line 2a and other than crop premiums on line 2b (line 2.1, Minnesota state page).

Lines 3a and 3b

Enter all farmowners and homeowners multi-peril premiums written (lines 3 and 4, Minnesota state page).

Line 3c

Enter the nonliability portion of all commercial premiums written (line 5.1, Minnesota state page).

Line 3d

Enter the liability portion of all commercial premiums written (line 5.2, Minnesota state page).

Line 4

Enter all inland marine premiums (line 9, Minnesota state page).

Line 5

Enter all ocean marine premiums (line 8, Minnesota state page).

Line 6

Enter all earthquake premiums (line 12, Minnesota state page).

Line 7

Enter all total auto physical damage premiums (lines 21.1 – 21.2, Minnesota state page) OR:

7a. all comprehensive fire, theft and miscellaneous premiums (excluding collision)
7b. all comprehensive fire, theft and miscellaneous premiums with deductibles (excluding collision)
7c. all fire and theft combined premiums
7d. all fire, theft and miscellaneous premiums
7e. all fire premiums
7f. all collision and other premiums

The total auto physical damage premiums listed by breakdown (lines 7a through 7f) should equal total auto physical damage premiums on the state page of your annual statement.

Line 8

Enter all aircraft physical damage premiums (line 22, Minnesota state page).

Line 9

Include all other premiums collected for your home state's fire insurance tax if not already included. Provide a breakdown schedule showing fire portion. For package policies, the fire insurance portion may be broken out to more accurately reflect the correct portion of fire premiums. Include a schedule detailing the breakdown.

Continued

2026 Form M11AR Instructions (Continued)

Information and Assistance

Website: www.revenue.state.mn.us
Email: insurance.taxes@state.mn.us
Phone: 651-556-3024

This material is available in alternate formats.

For questions about licensing and regulations, contact the Minnesota Department of Commerce:

Website: www.mn.gov/commerce
Email: licensing.commerce@state.mn.us
Phone: 651-539-1599 or 1-800-657-3978
Fax: 651-539-0107