



## SCHEDULE A - COMPUTATION OF PREMIUM TAX - IDAHO BASIS

1. DIRECT PREMIUMS WRITTEN (Must agree with ATTACHED Annual Statement, Schedule T, Line 13, Total of Columns 3, 4, and 5). \$ \_\_\_\_\_
  
2. LESS THAT PORTION OF PREMIUMS NOT SUBJECT TO TAX.  
An explanation must be attached showing the detail used to arrive at risk portion on all Idaho business. \$ \_\_\_\_\_
  
3. NET TAXABLE PREMIUMS - INSURANCE RISK PORTION (Line 1 - Line 2)  
Carry forward to Page 3, Schedule C, Line 1, Column A. \$ \_\_\_\_\_
  
4. PREMIUM TAX (1.5% of Line 3)  
Carry forward to Page 3, Schedule C, Line 1B, Column A. \$ \_\_\_\_\_

↔ **MUST ATTACH A COPY OF THE ANNUAL STATEMENT SCHEDULE T.**

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## SCHEDULE B - COMPUTATION OF PREMIUM TAX - STATE OF DOMICILE BASIS

1. IDENTIFY SPECIFIC BASIS FOR CALCULATING THE TITLE PREMIUMS RISK PORTION  
(i.e., Statute, Regulation, Bulletin, etc.) \_\_\_\_\_
  
2. DIRECT PREMIUMS WRITTEN (Report Idaho premiums as if your company were an Idaho insurer writing this business in your state of domicile) \$ \_\_\_\_\_
  
3. LESS ANY DEDUCTIONS ALLOWED BY YOUR STATE OF DOMICILE.  
Attach an explanation showing the calculations used to arrive at insurance risk portion on all Idaho business. This must agree with the process identified on Line 1. \$ \_\_\_\_\_
  
4. NET TAXABLE PREMIUMS - INSURANCE RISK PORTION (Line 2 - Line 3)  
Carry forward to Page 3, Schedule C, Line 1, and Column B. \$ \_\_\_\_\_
  
5. PREMIUM TAX (Line 4 multiplied by the Premium Tax Rate in your state of domicile)  
Carry forward to Page 3, Schedule C, Line 1B, Column B. \$ \_\_\_\_\_

**SECHEDULE C – COMPUTATION OF RETALIATORY TAXES**  
 Idaho Code § 41-340 (2) and (3)

<u>NET PREMIUMS SUBJECT TO TAX:</u>	Column A AMOUNT PAID IN IDAHO	Column B AMOUNT WOULD PAY IN DOMICILE STATE
1. TITLE PREMIUMS	\$ _____	\$ _____
A. TITLE TAX RATE	<u>1.5%</u>	_____
B. TITLE PREMIUM TAX (Line 1 x Line 1A)	\$ _____	\$ _____
2. MUNICIPAL, CITY OR COUNTY PREMIUMS	<u>XXXXXXXXXXXXXXXXXXXXXXX</u>	\$ _____
A. MUNICIPAL, CITY OR COUNTY TAX RATE	<u>XXXXXXXXXXXXXXXXXXXXXXX</u>	_____
B. MUNICIPAL, CITY OR COUNTY TAX (Line 2 x Line 2A)	<u>XXXXXXXXXXXXXXXXXXXXXXX</u>	\$ _____
3. OTHER TAXES - Identify Each:		
_____	<u>XXXXXXXXXXXXXXXXXXXXXXX</u>	\$ _____
_____	<u>XXXXXXXXXXXXXXXXXXXXXXX</u>	\$ _____
4. TOTAL TAXES (Lines 1B+2B+3) Carry GREATER AMOUNT of Column A or B Forward to Page 1, Recap of Taxes, Line 1	\$ _____	\$ _____