

FARM MUTUAL INSURANCE COMPANIES

Indiana Instructions for 2020 Annual Statement Filing

Please Note:

The Indiana Department of Insurance has partnered with the National Association of Insurance Commissioners (NAIC) in the use of OPTins, an online premium tax filing system. OPTins offers insurance companies the ability to submit their quarterly and annual premium tax filings, annual renewal fees and payments electronically.

OPTins is not mandatory; however insurance companies are encouraged to make such filings by utilizing OPTins. It is requested that if companies use OPTins for making such filings that all future filings be submitted through OPTins.

1. All Annual Statements must be prepared in Excel format and filed in duplicate.
2. Changes to the 2019 Annual Statement as the result of correspondence with this Department, or due to the requirements of other Insurance Departments of which this Department has been notified, should be taken into consideration when preparing the 2020 Annual Statement.
3. Changes resulting from a Department Examination must be reflected in this Statement.
4. Return this form with the Annual Statement filing.

FILING INSTRUCTIONS	
Blank forms: Required Filings Contact Person:	http://www.in.gov/idoi/2385.htm Annette Gunter (317) 232-2428 or agunter@idoi.in.gov
Mailing Address (except for Indiana Fee and Retaliatory Fee Statement and Premium Tax Filings):	Attn: Financial Services Indiana Department of Insurance 311 W. Washington St., Suite 103 Indianapolis, IN 46204-2787
Mailing Address for Indiana Fee & Retaliatory Fee Statement: Due: 3/1 Form available at: https://www.in.gov/idoi/2394.htm	Bank Lock Box Indiana Department of Insurance Post Office Box 626 Indianapolis, IN 46206-0626 All items must be mailed by U.S. mail. Postal Express, Priority Mail and Certified Mail are also accepted. All filings must be physically <u>received</u> by the P.O. Box no later than the due date. Companies are encouraged to electronically file Indiana Fee and Retaliatory Fee Statements through OPTins at http://www.optins.org/getting_started.htm . Debra Graves at dgraves@idoi.in.gov
Mailing Address for Premium Tax Filings and Payments: Annual due: 3/1 Quarterly due: 4/15, 6/15, 9/15, 12/15 Form available at: https://www.in.gov/idoi/2394.htm	Bank Lock Box Indiana Department of Insurance Post Office Box 577 Indianapolis, IN 46206-0577 All items must be mailed U.S. mail. Postal Express, Priority Mail & Certified Mail is also accepted. All filings, regardless if zero filing, must be physically <u>received</u> by the P.O. Box no later than the due date. Companies are encouraged to electronically file Annual and Estimated Quarterly filings through OPTins at http://www.optins.org/getting_started.htm Debra Graves at 317-232-1993 or dgraves@idoi.in.gov
Premium Tax Election:	IC 27-5.1-2-8 was modified during the 2006 legislative session to include IC 27-1-18-2, which allows a farm mutual to elect to pay premium tax. Notice of election must be filed on or before 11/30 each year with the Insurance Commissioner and the Commissioner of the Department of Revenue. In this notice the farm mutual must state it elects to pay premium tax rather than corporate tax; this notice refers to 1/1 of the following year. If a notice is not received by 11/30, the farm mutual will automatically have to pay corporate tax. The election notice needs to be sent to Debra Graves at the Financial Services mailing address above.

Premium Tax Penalties:	The penalty for non-filing is \$100 per day. The interest penalty for late filing is 1% of the payment due for each month or part of a month. (Penalty based on received date not postmark date)
Modifications and/or changes:	Changes: None
Original Signatures:	Annual Statements must have original signatures.
Signature/Notarization/Certification:	Annual Statements must have an original notarization.
Late Filings:	Annual Statement: Per IC 27-1-20-21.2, a \$500 late fee may be assessed if the annual statement is not received in our office on or before March 1 (postmark date accepted).

NAIC Company Code: _____

Company Name: _____

Contact: _____ Phone: _____

Email: _____

Checklist	Required filings for Indiana	Number of Copies	Due Dates
	Completed Instruction Checklist	2	3/1
	Annual Statement (8 1/2" x 14")	2	3/1
	Statement Filing Fees (Indiana Fee & Retaliatory Fee Statement)	1	3/1
	Premium Tax – only if election notice filed	1	3/1, 4/15, 6/15, 9/15, 12/15
	Income – Increase in Ledger Assets, page 2 from annual statement (to be filed with premium tax form, if elected)	1	3/1