

Surplus Lines Association of Minnesota

Instructions for 2009 Semiannual Stamping Fee Report

****Attention**:** This form must be filed even if no fees are due for the period. You are required to file this report with the Surplus Lines Association. **In addition, you must still file the semiannual Form IG260(Surplus Lines Tax Report) with the MN Department of Revenue separately.**

For MN Surplus Lines Insurance Laws, see M. S. 2008, CH. 60A.195 to 60A.209 and CH. 297I.

Minnesota tax ID required

Surplus lines licensees are required to have their own Minnesota tax ID number. This is not a Social Security number or agency Minnesota tax identification number.

If you don't have a MN tax ID number, you must register for one. Go to the Dept. of Revenue website www.taxes.state.mn.us and click "Register for a Minnesota tax ID number" on the e-Services menu. You'll be guided through the registration process step-by step and will receive your number immediately. Note: During the process, be sure to select "Sole proprietor" as the type of legal organization. Use NAICS classification number 524210 for insurance agencies.

Due dates

Surplus Lines Stamping Fees are due and payable August 15 (for six month period ending June 30) and February 15 (for six month period ending December 31.)

The U.S. postmark date, or date recorded or marked by a designated delivery service, is considered the filing date (private postage meter marks are not valid). When the due date falls on a weekend or legal holiday, statements postmarked the following business day are considered on time.

Number of Surplus Lines Licenses per Form

One. Each individual Surplus Lines Licensee must complete a semiannual stamping fee report.

Electronic Payments

At this time payments are not accepted electronically.

Payments by check

Payments are accepted by check only. Checks are to be made payable to: Surplus Lines Association of MN. Please include your Surplus Lines License number on the memo of the check.

Mail Payments

All payments can be sent directly to:

Surplus Lines Association of MN
Post Office Box 86
Mora, MN 55051

Line Instructions

1. Total premiums subject to stamping fee.

To generate a report Go to www.mnsla.com and click on the members menu. Click on Generate Transaction Reports in the Member Menu. Enter your user name and password, and then click on the log in tab. Next provide your license and PIN number. When this is verified, you can input a begin date and end date for your report. The report is generated based on the dates that transactions were **filed**. The report periods should be entered as either 01/01/YYYY to 06/30/YYYY OR 07/01/YYYY to 12/31/YYYY.

You can use the periodic report to total the entire premium subject to stamping fees filed for a time period and submit the semiannual statement of stamping fees and the

payment to the Surplus Lines Association office.

The semiannual stamping fee form can be found on our website under the Documents tab, Resources category.

2. Stamping fee rate

The current stamping fee rate is .0025 of the policy premium. The surplus lines stamping fee is imposed on all premium bearing surplus lines insurance transactions in the State of Minnesota by the authority of MN Law 2008, Chp. 366, Art. 17, Sec. 2, Subd. 7.

3. Total Stamping Fees Due

Spreadsheet will calculate this value based on number entered on line 1.

4. Penalties

If your payment is late, the penalty is \$250 or 1% of the stamping fees, whichever is greater. Enter total on line 4.

5. Total Payment Due.

Spreadsheet will calculate the total based on value from line 3 and number entered on line 4.

Information and assistance

If you need additional information or help to complete this form, call 320-679-4244 or email info@mnsla.com

TTY: Call 711 for Minnesota Relay. We'll provide information in other formats upon request to persons with disabilities.

2009 MN Semiannual Stamping Fee Report

Name of surplus lines agent	Check if: <input type="checkbox"/> No activity <input type="checkbox"/> New name <input type="checkbox"/> New address
Agency name	Surplus lines license number
Agency street address (including state, zip)	Date Licensed
Contact person and daytime phone number	Email Address
Website address	Phone Number
For the period of (check one): <input type="checkbox"/> Jan. 1 - June 30, 2009 (Due August 15) <input type="checkbox"/> July 1 - Dec. 31, 2009 (Due February 15)	

Instructions	Fees Due
1. Total premiums subject to stamping fee.	
2. Stamping fee rate.	
3. Total Stamping Fees	
4. Penalties . . . (See Instructions).	
5. Total Payment Due	

Payment method by **Check Only**. Payable to Surplus Lines Association of MN

Please write Surplus Lines License number on your check.

I declare that this stamping fee payment is correct and complete to the best of my knowledge and belief.

Signature of agent

Print or type name of agent and date

Mail signed form and payment to :
Surplus Lines Association of MN
Post office Box 86
Mora, MN 55051