T69-ESINS	FIRST ESTIMATE	STATE OF RHODE ISLAN	4D	INSURANCE	2009	
	DECL	ARATION OF GROSS PREMIUM INS	SURANCE ESTIMATED TAX			
Name and Addre	:	Calendar Year 2008		 		
ONE CAPITO PROVIDENCE	ON OF TAXATION L HILL, STE 9 , RI 02908-5811		AMOUNT ON LINE 5 IS DUE AND I			
	r the penalties of perjury t rect and complete declaratio		en examined by me and to the best	: of my knowle	edge and belief	
Signature of O	fficer or Agent		Title	• • • • • • • • • • • • • • • • • • • •		
T69-ESINS	SECOND ESTIMATE		RHODE ISLAND IUM INSURANCE	INSURANCE	2009	
Federal I.D. # Name and Addre	:	Calendar Year 2008	1. Total Estimated Tax for Current Year 2. 60% of Line 1 3. Less Amount From Prior Credit Applied To This Payment 4. PAYMENT DUE WITH THIS VOUCHER-Line 2 Less Line	 		
THE DIVISIONE CAPITO	mated tax payment with amoun ON OF TAXATION L HILL, STE 9 , RI 02908-5811	t due to:	AMOUNT ON LINE 4 IS DUE AND I	AYABLE ON OR	BEFORE JUNE 15TH	
Signature of Officer or Agent			Title	Title		
			FOR GROSS PREMIUM INSURANCE TAX			

1. Every Insurance Company who is liable for gross premium tax shall file a declaration of its estimated tax for the calendar year, if its estimated tax for such calendar year can reasonably be expected to exceed \$500.00. The entire amount of such estimated tax shall constitute the amount of advance required to be paid.

The due dates and amounts of the installments are as follows:

March 15th (40% of total estimated tax due)
June 15th (60% of total estimated tax due)

2. There is required and addition to the tax of 18% per annum for underpayments and penalties for the willful neglect or failure to file a declaration or pay any installment due thereunder.

NOTE

When there is not an increase in the tax rate from one year to the next, no interest or penalty will occur for underestimated tax payment if prepayments are made equal to the prior year's tax.