

2017 Virginia Insurance  
Premiums License Tax  
Schedule of Adjustments



Company Name	FEIN	NAIC/License #
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**SECTION A - Additions to Direct Premiums Written - to the extent not included on Form 800, Line 1.**

1. Uninsured Motorist Premium Distribution .....	1.	_____	.00		
2. Virginia Property Insurance Association (FAIR Plan) Premium Distribution .....	2.	_____	.00		
3. Additional Finance and Service Charges Not Included in Premiums .....	3.	_____	.00		
4. Other Additions - Enter addition code and amount.					
	4a.	<table border="1"><tr><td></td><td></td></tr></table>			4a. _____ .00
	4b.	<table border="1"><tr><td></td><td></td></tr></table>			4b. _____ .00
	4c.	<table border="1"><tr><td></td><td></td></tr></table>			4c. _____ .00
5. <b>Total Additions</b> - Add Section A, Lines 1 - 4c. Enter on Form 800, Line 2.....	5.	_____	.00		

**SECTION B - Subtractions from Direct Premiums Written - to the extent included on Form 800, Line 1.**

6. Workers' Compensation Premiums. Do not include Workers' Compensation Finance and Services charges .....	6.	_____	.00		
7. Federal Employees Health Benefits Program Premiums .....	7.	_____	.00		
8. Medicare Premiums - Individuals and Groups. Do not include Medicare Part D Premiums .....	8.	_____	.00		
9. Other Subtractions - Enter subtraction code and amount.					
	9a.	<table border="1"><tr><td></td><td></td></tr></table>			9a. _____ .00
	9b.	<table border="1"><tr><td></td><td></td></tr></table>			9b. _____ .00
	9c.	<table border="1"><tr><td></td><td></td></tr></table>			9c. _____ .00
	9d.	<table border="1"><tr><td></td><td></td></tr></table>			9d. _____ .00
10. <b>Total Subtractions</b> - Add Section B, Lines 6 - 9d. Enter on Form 800, Line 4.....	10.	_____	.00		

**SECTION C - Adjustments**

11. Addition to Tax from Form 800C, Line 17 .....	11.	_____	.00
12. Penalty for Late Payment			
12a. Insurance Premiums License Tax Penalty.....	12a.	_____	.00
12b. Retaliatory Tax Penalty.....	12b.	_____	.00
13. Interest.....	13.	_____	.00
14. Fee for Late Filing.....	14.	_____	.00
15. <b>Total Adjustments</b> - Add Section C, Lines 11 - 14. Enter on Form 800, Line 18 .....	15.	_____	.00

Enclose completed Schedule 800ADJ with Form 800. Do not submit blank form.