

**2022 Virginia
Schedule 800ADJ**

**Insurance Premiums License Tax
Schedule of Adjustments**



Company Name	FEIN	NAIC/License #
--------------	------	----------------

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. | | | 4a. <u> </u> .00 |
| 4b. | | | 4b. <u> </u> .00 |
| 4c. | | | 4c. <u> </u> .00 |
| 5. Total Additions – Add Section A, Lines 1-4c. Enter on Form 800, Line 2..... | | | 5. <u> </u> .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. | | | 9a. <u> </u> .00 |
| 9b. | | | 9b. <u> </u> .00 |
| 9c. | | | 9c. <u> </u> .00 |
| 9d. | | | 9d. <u> </u> .00 |
| 10. Total Subtractions – Add Section B, Lines 6-9d. Enter on Form 800, Line 4..... | | | 10. <u> </u> .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. Total Adjustments – Add Section C, Lines 11-14. Enter on Form 800, Line 18 | | | 15. <u> </u> .00 |

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