



VT Form <b>SLT-681</b>	<b>VERMONT SURPLUS LINES INSURANCE                  and DIRECT INSURANCE PLACEMENT                  TAX RETURN and REPORT</b>
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Please PRINT in BLUE or BLACK INK

Entity Name (if filing a direct placement insurance return)			Entity's Federal ID Number	
<b>OR</b> Broker's Last Name	First Name	MI	<b>OR</b> Broker's Social Security Number	
Mailing Address			Broker's License Number	
City	State	ZIP Code	Reporting Year	
E-mail Address				

Check here if this is an **AMENDED** return.

**Surplus Lines Broker.** File this form and complete Schedules SLT-682 and SLT-683 only if business was written during the reporting period.

Select return reporting period to be filed.

**JAN - MAR**  
(due Apr. 30)

**APR - JUN**  
(due Jul. 31)

**JUL - SEP**  
(due Oct. 31)

**OCT - DEC**  
(due Jan. 31)

**Direct Insurance Placement.** Complete Schedule SLT-684. Due March 1.

1. Total premiums written ..... **1.** \_\_\_\_\_
  - **For Surplus Lines Broker:** Enter total net taxable premiums from all pages of Schedule SLT-682.
  - **For Direct Insurance Placement:** Enter net premium from Schedule SLT-684.
2. Tax Rate ..... **2.** \_\_\_\_\_ **3 %**
3. Tax due (Multiply Line 1 by Line 2) ..... **3.** \_\_\_\_\_
  - If Line 3 is a negative number, the amount will be refunded to you.
  - If Line 3 is a positive number, make check payable to **Vermont Department of Taxes**

I hereby certify that this return is true, correct and complete to the best of my knowledge. If prepared by a person other than the taxpayer, this declaration further provides that under 32 V.S.A. § 5901, this information has not been and will not be used for any other purpose, or made available to any other person, other than for the preparation of this return unless a separate valid consent form is signed by the taxpayer and retained by the preparer.

Signature of Officer or Authorized Agent	Date	Daytime telephone number (optional) (     )
Printed name	E-mail address	

Send the original return and payment to:

Send a copy of this return to:

VT Department of Taxes  
 133 State Street  
 Montpelier, VT 05633-1401

VT Department of Financial Regulation  
 89 Main Street  
 Montpelier, VT 05620-3101

**Form SLT-681**  
 LegacyJHT  
 08/16