

## **DRAFT FORM — NOT FOR FILING**

This draft form has been updated to include the most recent changes effective for Tax Year 2025 Virginia returns. If legislative changes or issues arise, we will post a new version of this draft form.

Please continue to monitor [tax.virginia.gov/early-release-forms](https://tax.virginia.gov/early-release-forms) for future drafts of this form. Once forms are final, we will post them on our website at [tax.virginia.gov/forms](https://tax.virginia.gov/forms).

**Virginia  
Schedule 844**

**Statement of Exemption  
Mutual Assessment  
Property & Casualty Insurers**



Company Name	FEIN	NAIC/License #
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I certify that the company named above is exempt from paying the Insurance Premiums License Tax on direct premium income as prescribed in Va. Code § 58.1-2502. This company operates in the counties and/or cities shown below (please indicate the corresponding population):

COUNTIES / CITIES	POPULATION

Under penalty of perjury, I declare that I have examined this report and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of Officer	Printed Name	Title	Date
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Preparer's Name	Preparer's FEIN / PTIN / SSN	Preparer's Phone Number
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