HAINES BOROUGH SALES TAX REPORT

ACCOUNT NO. _____ P.O. Box 1209 • Haines, Alaska 99827 • Phone 907-766-2231 • Fax 907-766-2716

ALL INFORMATION ON THIS FORM SHALL BE KEPT CONFIDENTIAL

NAME _____ TYPE OF BUSINESS _____

ADDRESS _____

MONTHLY FILERS:

TAX DUE: This form must be completed and returned within a month and 10 days after the end of the month the tax was collected. (EXAMPLE: Sales tax collected during July is due Sept. 10; it is delinquent Sept. 11.)

QUARTERLY FILERS:

Complete and return form within 20 days after the end of the quarter the tax was collected. Businesses with taxable gross monthly receipts of three thousand ($3,000) or less may file and pay sales tax quarterly. (EXAMPLE: 1st Quarter sales tax collected during Jan.-March is due April 20.)

Disregard any items not applicable to you.

REPORT FOR: ☐ **Month** _____ **20** _____
☐ **Quarter** _____ **20** _____
☐ **Calendar Year** _____
(Must qualify per HBC Section 3.80.090)

Is this a FINAL RETURN? ☐ **YES** ☐ **NO** **If YES, check one:**

☐ **SOLD BUSINESS; TO WHOM** _____
☐ **OUT OF BUSINESS; DATE** _____
☐ **CLOSED for Season; DATE to reopen** _____
☐ **OTHER; Explain** _____

	5.5% COMBINED TAX	
	Column 1: Sales Boroughwide 4%**	**Column 2: Sales in Townsite Service Area, Additional 1.5%**
1. GROSS SALES ..... (Enter Gross Sales Figure in Columns 1 & 2) Receipts from all sources, taxable and exempt. (**DO NOT INCLUDE RETURNED MERCHANDISE, NSF CHECKS, OR SALES TAX COLLECTED**)	$	$
2. LESS EXEMPT SALES: A. Sales outside both Townsite Service Area and Borough		
B. Sales to government agencies (federal, state, townsite, borough)		
C. Sales for resale		
★ D. Other sales exempt by ordinance, identify:		
3. TOTAL EXEMPT SALES (Add lines A through D of 2)	($-)	($-)
4. NET TAXABLE SALES (Line 1 less line 3)		
5. AMOUNT OF TAX DUE (Calculate 4% and 1.5% from Net Sales on line 4)	$	$
6. 1% DISCOUNT FOR PROMPT PAYMENT: Deduct 1% of TAX DUE only if paid by the end of the month following tax-month reported. (EXAMPLE: If May tax is paid by the end of June) ..... **- DO NOT DEDUCT ON DELINQUENT RETURNS, DELINQUENT ACCOUNTS, OR QUARTERLY REPORTS -**	($-)	($-)
7. TAX DUE after discount (Line 5 less line 6)	$	$
FOR OFFICE USE		

★ **Deductions claimed under this heading must be clearly classified in writing or they will not be allowed. Use separate sheet if more space is needed. DO NOT send receipts, vouchers, etc.**

8. TOTAL TAX (add columns 1 and 2 from line 7) ..... $

9. LATE PAYMENT (EXAMPLE: Monthly - May taxes are due July 10; Quarterly - 1st Quarter taxes are due April 20.)
If you are delinquent, add on penalty and interest.
a. PENALTY: 10% of TOTAL TAX on line 8 plus 5% each additional month of delinquency until 25% has accrued. = $ _____
b. INTEREST: 15% per annum from date of delinquency until paid. (TAX DUE x 15% ÷ 365 = _____ interest/day x _____ days late) = $ _____
Add a + b = $

10. Credits or Debits from previous month ..... $

11. **TOTAL AMOUNT PAID** ..... **MAKE CHECKS PAYABLE TO: HAINES BOROUGH** $

☐ **CHECK**
☐ **CASH**

**** EXCURSION INLET TAX RATE: 3.5%**

CARBONLESS FORM: PLEASE RETAIN YELLOW COPY FOR YOUR FILES AND RETURN WHITE COPY WITH YOUR REMITTANCE.

I DECLARE, SUBJECT TO THE PENALTIES PRESCRIBED IN HAINES BOROUGH ORDINANCES THAT THIS RETURN (INCLUDING ANY ACCOMPANYING STATEMENTS) HAS BEEN EXAMINED BY ME, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN.

DATE _____ X _____
(Signature of firm member, owner or agent)

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AN AUDIT OF THIS SALES TAX REPORT REVEALS THAT: _____

BECAUSE OF ABOVE:

( ) **YOU HAVE OVERPAID YOUR SALES TAX IN THE AMOUNT OF $** _____ **AND CREDIT IS APPLIED TO YOUR ACCOUNT.** **(See attached form)**

( ) **YOU HAVE UNDERPAID YOUR SALES TAX IN THE AMOUNT OF $** _____ **AND YOU SHOULD REMIT WITH YOUR NEXT RETURN.** **(See attached form)**