REPORT FOR: QUARTER _____ YEAR: _____

ACCOUNT _____

COMBINED CITY AND BOROUGH SALES TAX REPORT
KETCHIKAN GATEWAY BOROUGH

1900 First Avenue
KETCHIKAN, ALASKA 99901
(907) 228-6609
FAX (907) 228-6698
http://www.borough.ketchikan.ak.us

If Change of Owner, Firm Name or Address:

Name: _____
Address: _____
City: _____ State _____ Zip _____

If this is a Final Return:

Date Business discontinued: _____
Reason: _____
Location of Records: _____

	A Non-taxable Sales Outside City & Borough	B Borough Outside Cities	C Inside City of Saxman	D Inside City of Ketchikan	E Total Sales A+B+C+D
1. Gross receipts (not including tax) # of Apartment(s) rented _____ / $ _____ per month (*).					
2. Less returns and allowances					
3. Gross receipts (not including tax)					
4. Deduction: A) Sales to government agencies (*)					
B) Single unit sales over $1,000 (*)					
C) Senior citizen exemptions (*)					
D) Non-profit organizations exemption (*)					
E) Sales for resale (wholesale sales) (*)					
F) Other claimed exemptions (*)					
5. Total exemptions claimed					
6. Net taxable receipts (line 3 less line 5)					
Apply these percentages to obtain tax due effective 7-1-2004		x .025	x .065	x .06	
7. Total tax due on net taxable receipts					$
8. Combined tax due cities of Ketchikan, Saxman, and Ketchikan Gateway Borough (add lines 7B, 7C, 7D)				Total tax due:	$

*ATTACH EXPLANATION IF DEDUCTION IS TAKEN

Full payment must accompany this report

NOTE: Returns must be affixed with U.S. Postal mark on or before the last day of the month following the last month of each quarter. The tax imposed shall be payable at the end of each quarter of the calendar year, and shall be due not later than one month after expiration of the quarter immediately preceding, beyond which time it shall be delinquent.

9. Penalty of 1% of tax due the first 7 working days delinquent, 15% thereafter, plus 5% per month until 25% has accrued. _ _ _ _ _ _ _ _ _	+$
10. Interest: 12% per annum from date of delinquency until paid (of line 8) – 1% per month _	+$
11. Total amount remitted herewith	$

I declare, subject to the penalties prescribed in the ordinances of the Cities of Ketchikan and Saxman, and the Ketchikan Gateway Borough, that this return, (including any accompanying statement) has been by me, and to the best of my knowledge and belief, is a true, correct and complete return. In accordance with KGB Code 5.120.050 any misuse of Sales Tax will be cited.

By/Title _____ Contact No. _____ Date _____

A review of this sales tax report reveals that: _____

_____

Because of the above, you ☐ overpaid ☐ underpaid $ _____

RETURN WHITE COPY WITH REMITTANCE