



CITY OF UNALASKA
 PO BOX 610 UNALASKA, AK 99685
 Phone (907) 581-1251 Fax (907) 581-1417
 www.ci.unalaska.ak.us

HOTEL / MOTEL TAX REPORT

QTR ENDING	QTR1 <input type="checkbox"/> March 31 DUE April 30	QTR2 <input type="checkbox"/> June 30 DUE July 31	QTR3 <input type="checkbox"/> September 30 DUE October 31	QTR4 <input type="checkbox"/> December 31 DUE January 31	YEAR _____
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NAME: _____	BUSINESS LIC. # _____
ADDRESS: _____	

A. DETERMINATION OF ADJUSTED GROSS RECEIPTS:

- | | |
|--|----------|
| 1. GROSS RECEIPTS FOR QUARTER <i>(Including Hotel/Motel Tax collected)</i> | \$ _____ |
| 2. NON-TAXABLE RECEIPTS <i>(Complete Page 2)</i> | \$ _____ |
| 3. ADJUSTED GROSS RECEIPTS <i>(Subtract Line 2 from 1)</i> | \$ _____ |

B. DETERMINATION OF TAXABLE RECEIPTS:

- | | |
|--|----------|
| 4. DIVIDE LINE 3 BY 1.05 (TAXABLE GROSS RECEIPTS) | \$ _____ |
|--|----------|

C. DETERMINATION OF TAX DUE:

- | | |
|--|----------|
| 5. MULTIPLY AMOUNT OF LINE 4 BY .05 – HOTEL/MOTEL TAX DUE | \$ _____ |
| 6. MONTHLY PREPAYMENTS: | |
| A. FIRST MONTH | \$ _____ |
| B. SECOND MONTH | \$ _____ |
| C. THIRD MONTH | \$ _____ |
| D. DISCOUNT TAKEN | \$ _____ |
| E. TOTAL <i>(Add A through D)</i> | \$ _____ |
| 7. CREDIT OR AMOUNT DUE FROM PREVIOUS REPORTS | |
| 8. TAX DUE <i>(Line 5 Less Line 6E, Plus or Minus Line 7)</i> | \$ _____ |
| 9. PENALTY AND INTEREST DUE <i>(If applicable)</i> | \$ _____ |
| 10. TOTAL DUE <i>(Line 8 Plus Line 9)</i> | \$ _____ |

Quarterly Hotel/Motel Tax Reports must be filed at the end of each quarter in addition to Monthly Prepayment Forms if you have elected to use the Monthly Prepayment System. This report is invalid unless completed in detail and signed. Report must be filed even if there were no receipts for the quarter. Delinquent reports incur a penalty of 5% per month or fraction thereof up to 15%, plus interest at 10% per annum. Failure to file is a minor offense with the fines established by code up to \$500 per violation or day. The City's additional remedies for violations of hotel/motex tax ordinances are set out in Unalaska Code of Ordinances 6.48.130.

I CERTIFY THAT THE INFORMATION PROVIDED IS TRUE AND CORRECT.

SIGNATURE _____	TITLE _____	DATE _____
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PRINTED NAME _____	EMAIL ADDRESS _____
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COMPLETED HOTEL/MOTEL TAX REPORT MAY BE EMAILED TO CITY CLERK AT: tax@ci.unalaska.ak.us



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HOTEL/MOTEL TAX REPORT

Name: _____
 Address: _____

Business License No. _____
 Quarter Ending: _____
 Due on or Before: _____

SUBSTANTIATION OF ALL NON-TAXABLE TRANSACTIONS

1. SALES TO GOVERNMENT AGENCIES \$ _____

SOLD TO:

AMOUNT:

2. ALL OTHER SALES CLAIMED EXEMPT \$ _____

SOLD TO:

JUSTIFICATION FOR EXEMPTION:

AMOUNT:

TOTAL ALL NON-TAXABLE TRANSACTIONS

..... \$ _____