

### CITY OF ADAK, ALASKA

P.O. BOX 2011 - ADAK, ALASKA 99546-2011 Phone: (907) 592-4500 - Fax: (907) 592-4262

www.adak-ak.gov accounting@adak-ak.gov

# TRANSIENT LODGING TAX RETURN

**NOTICE:** Adak City Ordinances Chapter 4.12 details the application, exemptions, collections and remittance of transient lodging tax. The tax return may be delivered, mailed, faxed or emailed to the address above. This report is invalid unless completed in detail. The report must be filed even if there is no activity for the month.

#### SCHEDULE A - SPECIES AND VALUE MUST BE ATTACHED TO THIS REPORT

Cit	ty Tax ID #:	For Calendar Month/Year:				
Business Name:						
Ad	dress:	_				
1.	GROSS TRANSIENT LODGING RECEIPTS/REVENUE:	\$.				
2.	LESS GOVERNMENT EXEMPT RECEIPTS/REVENUE:	(From Schedule A): \$.				
3.	SALES SUBJECT TO TRANSIENT LODGING TAX (Subtract line 2 from line 1):	\$.				
4.	TRANSIENT LODGING TAX AT 5% (Multiply line 3 by .05):	\$.				
5.	LATE RETURN FILING FEE (if applicable \$25/Month):	\$.				
6.	PENALTY FOR LATE/NON-PAYMENT OF TAX (if applicable 5%/month, max 20%	s): \$.				
7.	INTEREST FOR LATE/NON-PAYMENT OF TAX (if applicable 15% per annum):	\$.				
8.	TOTAL DUE (Add Lines 4 through 6):	\$.				
A late filing fee of \$25 per month shall be added to all late-filed tax reports in addition to interest and penalties. The date of actual receipt not the postmark shall determine the date of filing returns.						
A penalty equal to five percent of the delinquent tax shall be added to the tax for the first month or fraction thereof, until a total of 20% of delinquent tax has been reached. In addition to the above penalty, interest shall accrue at the rate of fifteen percent per annum on the delinquent tax from the date of delinquency.						
If fees, penalty and interest are incorrectly calculated, you will be invoiced for the difference which is immediately due and payable.						
I CERTIFY UNDER PENALTY OF PERJURY 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.						
SIGI	NATURE	DATE				
PRIN	NTED NAME & TITLE					



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#### **SCHEDULE A - EXEMPT SALES**

City Tax ID #:			For Calendar Month/Year:			
Business Name:			1			
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GOVERNMENT AGENCIES - LIST ALL SALES INDIVIDUALLY						
Date	Government Agency Name	Α	gency Type	Amount		
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Total Government Agency Sales (Report on Page 1, Line 2):