



City and Borough of Sitka Cigarette and Tobacco Products 2016 TAX RETURN

Send completed return to:
City and Borough of Sitka
 Finance Department
 Excise Tax
 100 Lincoln Street
 Sitka, Alaska 99835

SEE INSTRUCTIONS ON REVERSE SIDE

This return must be filed and the tax paid on or before the last day of the month following the month during which the cigarettes and other tobacco products were manufactured, imported or acquired.

NAME AND ADDRESS AS IT APPEARS ON THE CIGARETTE AND TOBACCO PRODUCTS LICENSE:		RETURN FOR THE MONTH AND YEAR OF:
		CONTACT NAME:
CBS BUSINESS REGISTRATION NO.:	CTP LICENSEE NO.:	PHONE NUMBER:

1. Totals for Cigarettes:

- a. Number of cigarettes manufactured or imported during the month
- b. Less deductions for sales to Exemption Cardholders (See Instructions)
- c. Less other deductions (See Instructions)

1a	
1b	
1c	
2	
3	

- 2. Total number of taxable cigarettes (line 1 a less lines 1b and 1c)
- 3. Tax @ 123.1 mills per cigarette (Multiply line 2 by .1231)
- 4. Totals for all other tobacco products:

- a. Wholesale price of tobacco products manufactured or import during the month
- b. Less deductions for sales to Exemption Cardholders (See Instructions)
- c. Less other deductions (See Instructions)

4a	
4b	
4c	
5	
6	
7	
8	
9	
10	
11	
12	

- 5. Total wholesale price of taxable tobacco products (line 4a less lines 4b and 4c)
- 6. Tax @ 90% (Multiply line 5 by .90)
- 7. Total cigarette and tobacco products tax (Add lines 3 and 6)
- 8. Prior month adjustment (Attach explanation)
- 9. Total cigarette and tobacco tax due (Total of lines 7 and 8)
- 10. Penalty - Failure to File Timely (6% or 15% of line 9. See Instruction)
- 11. Penalty - Failure to Pay Timely (6% or 15% of line 9. See Instructions)
- 12. Interest – Pursuant to Code Section 4.26.160, interest at the rate of 12% per annum shall accrue on the unremitted balance of taxes due from the operator. To calculate interest due, multiply the amount on Line 9 by .00033 for each day the tax is delinquent.
- 13. Total AMOUNT DUE RETURN (Add lines 9 through 12)

13	
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Please make checks payable to the CITY AND BOROUGH OF SITKA for the amount on line 13.

OTHER INFORMATION REQUIRED BY THE CITY AND BOROUGH OF SITKA:

\$

NUMBER OF CIGARETTES ACQUIRED WITHIN THE CITY AND BOROUGH OF SITKA WITH TAX INCLUDED

WHOLESALE PRICE OF OTHER TOBACCO PRODUCTS ACQUIRED WITHIN THE CITY AND BOROUGH OF SITKA WITH TAX INCLUDED

I certify under penalty of perjury that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return of all cigarettes and other tobacco products manufactured, imported or acquired in the City and Borough of Sitka during the month specified above.

SIGNATURE OF TAXPAYER OR OFFICER OF CORPORATION:	TITLE (PLEASE PRINT):	DATE:
NAME, ADDRESS AND SIGNATURE OF AGENT OR PREPARER		DATE:

Note: This return must be filed by each licensee even if no cigarettes or other tobacco products were manufactured, imported or acquired during the month covered.