



Sales Tax Return

Period Covered: _____

Due Date: _____

Account Number: _____

Business Name: _____

Business Address: _____

1. Gross Sales & Service (all sales, rentals, leases, services; taxable & non-taxable): _____

2. Other:

A. Add: Bad debts collected: _____

B. Add lines 1&2A: _____

3. Deductions:

A. Non-taxable service sales (included in line 1 above): _____

B. Sales to other licensed dealers for purposes of taxable resale: _____

C. Sales shipped out of city or state (included in line 1 above): _____

D. Bad debts charged off (on which city sales tax has been paid): _____

E. Trade-ins for taxable resale: _____

F. Sales of gasoline and cigarettes: _____

G. Sales to governmental, religious and charitable organizations: _____

H. Returned goods: _____

I. Prescription drugs and prosthetic devices: _____

J. Food stamp and federal special supplement program sales: _____

K. Other deductions, please list: _____

L. Total Deductions (total from 3A-3K): _____

4. Total city net taxable sales & service (line 2B-Total line 3L): _____

5. City Sales Tax: (Line 4 total \$ x 4.5%) = _____

A. Net taxable sales before 1-1-17: (\$ x 0.25%) = _____

B. Accommodations tax: (Gross rentals \$ x 1%) = _____

- 6. Reservations prior 12-31-22 for stays commencing between 1-1-23 and 4-15-23: _____
- 7. STR tax: (Gross rentals – Line 6 x 9%) = _____
- 8. ADD: Excess tax collected: _____
- 9. ADD: Tax on resale inventory taken for own use: (\$ X 4.5%) = _____
- 10. Total tax due: (Add lines 5 through 9): _____
- 11. ADD **If** return is filed after due date:
 - A. Penalty (Greater of \$15 or 10% of line 10): _____
 - B. Interest: (1% interest per month of line 10): _____
- 12. Total tax, penalty & interest: (ADD lines 10+11): _____
- 13. Prior Period Adjustments, if any: Attach a copy of the debit/credit card notice:
 - A. Add: _____
 - B. Deduct: _____
- 14. **Total due & payable:** _____

Payment

Make check or money order payable to the City of Steamboat Springs

Acknowledgement

I hereby certify under penalty of perjury that the statements made herein are to the best of my knowledge true and correct.

Company: _____

Email: _____

Phone: _____

Date: _____

Signature: _____