

Alaska 2013 Dive Fishery Management Assessment

DEPARTMENT USE ONLY
ENV
FSN

580

<input type="checkbox"/> EIN <input type="checkbox"/> SSN			Fisheries Business License No.
Taxpayer Name			Business Location or Vessel Name
Mailing Address			Telephone Number
City	State	Zip Code	Fax Number
Contact Person			Email Address

Original Return **Amended Return (attach explanation)**

<input type="checkbox"/> Licensed Buyer Year: _____ Quarter in which dive resources were purchased <table border="0"> <tr> <td style="text-align: center;">Quarter</td> <td style="text-align: center;">Due Date</td> </tr> <tr> <td><input type="checkbox"/> Jan - Mar</td> <td>April 30, 2013</td> </tr> <tr> <td><input type="checkbox"/> Apr - Jun</td> <td>July 31, 2013</td> </tr> <tr> <td><input type="checkbox"/> Jul - Sep</td> <td>October 31, 2013</td> </tr> <tr> <td><input type="checkbox"/> Oct - Dec</td> <td>January 31, 2014</td> </tr> </table>	Quarter	Due Date	<input type="checkbox"/> Jan - Mar	April 30, 2013	<input type="checkbox"/> Apr - Jun	July 31, 2013	<input type="checkbox"/> Jul - Sep	October 31, 2013	<input type="checkbox"/> Oct - Dec	January 31, 2014	<input type="checkbox"/> Fisherman Indicate the year the resource was exported from the state or sold to an unlicensed buyer. Year: _____ <i>The due date is March 31, 2014.</i>
Quarter	Due Date										
<input type="checkbox"/> Jan - Mar	April 30, 2013										
<input type="checkbox"/> Apr - Jun	July 31, 2013										
<input type="checkbox"/> Jul - Sep	October 31, 2013										
<input type="checkbox"/> Oct - Dec	January 31, 2014										

Bonus Return
 Indicate above the year and quarter the resource was originally reported. Indicate below the month and year the bonus payments were made.
 Month: _____ Year: _____ *The due date is the last day of the month following the month of the bonus payment.*

	A Pounds	B Value	C Rate	D Tax (Column B x C)
1	Geoduck		7% (.07)	
2	Sea Cucumber		5% (.05)	
3	Sea Urchin		7% (.07)	
4	Total (add lines 1 through 3, Column D)			\$
5	AMENDED AND BONUS RETURNS ONLY Taxes previously paid for this quarter/year			(AA
6	TOTAL TAX LIABILITY (REFUND) DUE (Subtract line 5 from line 4)			\$

Electronic Payment Information

Note: If your liability is \$100,000 or more, you must use the Online Tax Information System (OTIS) at www.tax.alaska.gov or wire transfer.

Check if you are paying by: OTIS confirmation # _____ Wire transfer date _____

I declare under penalty of unsworn falsification that this return, including all accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is true and complete.

Signature	Printed name and title	Date
Department use only PMD	Validation	

Pay online at www.tax.alaska.gov or make check payable to **State of Alaska**

580

Mail to: Alaska Department Of Revenue, PO Box 110420, Juneau AK 99811-0420

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