

Dive Fishery Management Assessment

<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	Mobile Number
Contact Person			Email Address

<input type="checkbox"/> Original Return <input type="checkbox"/> Amended Return (attach explanation)											
<input type="checkbox"/> Licensed Buyer Year: _____ Quarter in which dive resources were purchased <table style="width: 100%; border-collapse: collapse;"> <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 style="text-align: center;">April 30, 2015</td> </tr> <tr> <td><input type="checkbox"/> Apr - Jun</td> <td style="text-align: center;">July 31, 2015</td> </tr> <tr> <td><input type="checkbox"/> Jul - Sep</td> <td style="text-align: center;">November 2, 2015</td> </tr> <tr> <td><input type="checkbox"/> Oct - Dec</td> <td style="text-align: center;">February 1, 2016</td> </tr> </table>	Quarter	Due Date	<input type="checkbox"/> Jan - Mar	April 30, 2015	<input type="checkbox"/> Apr - Jun	July 31, 2015	<input type="checkbox"/> Jul - Sep	November 2, 2015	<input type="checkbox"/> Oct - Dec	February 1, 2016	<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, 2016.</i>
Quarter	Due Date										
<input type="checkbox"/> Jan - Mar	April 30, 2015										
<input type="checkbox"/> Apr - Jun	July 31, 2015										
<input type="checkbox"/> Jul - Sep	November 2, 2015										
<input type="checkbox"/> Oct - Dec	February 1, 2016										

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)	1	\$
2	Sea Cucumber		\$	5% (.05)	2	\$
3	Sea Urchin		\$	7% (.07)	3	\$
4	Total (add lines 1 through 3, Column D)				4	\$
5	AMENDED AND BONUS RETURNS ONLY Amounts previously paid for this quarter/year				5	\$ ()
6	TOTAL TAX LIABILITY (REFUND) DUE (Subtract line 5 from line 4)				6	\$

Electronic Payment Information

Note: If filing quarterly and your combined liability is \$100,000 or more you must pay online using the Online Tax Information System (OTIS) at www.tax.alaska.gov or by wire transfer. If filing annually and your combined liability is \$150,000 or more, you must pay online using Revenue Online at www.tax.alaska.gov or by wire transfer.

Check, if quarterly filer paying by: OTIS confirmation # _____ Wire transfer date _____

Check, if an annual filer paying by: Revenue Online 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	

DEPARTMENT USE ONLY
ENV
FSN

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

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