

**Regional Seafood Development
Monthly Tax Return****2015**

<input type="checkbox"/> EIN <input type="checkbox"/> SSN	Taxpayer Name		Fisheries Business License #	
Business Location/Vessel Name			Contact Person	
Mailing Address			Contact Email	
City	State	Zip Code	Contact Phone	Contact Mobile

Type of Return

<input type="checkbox"/> No Activity	<input type="checkbox"/> Amended (attach explanation)	<input type="checkbox"/> Bonus	<u>Month/Year resource originally purchased</u> Month: _____ Year: _____	<u>Month/Year bonus payment made</u> Month: _____ Year: _____
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Type of Business

	Month/Year resource purchased:		
Licensed Buyer	Month: _____	Year: 2015	Monthly tax - due last day of month following month of purchase

Tax Calculation

Region		Fishery	Pounds	A Value	B Rate	C Tax (Column A x B)	
1	Bristol Bay	Salmon drift gillnet - S03T		\$	1% (.01)	1	\$
2	Prince William Sound	Salmon drift gillnet - S03E		\$	1% (.01)	2	\$
3	Prince William Sound	Salmon set gillnet - S04E		\$	1% (.01)	3	\$
4	Total (add lines 1 through 3, Column C)					4	\$
5	Amended and Bonus returns only. Taxes previously paid for this period					5	\$ ()
6	Total Tax Liability (Refund) Due (subtract line 5 from line 4)					6	\$

Electronic Payment Information

Note: If your tax liability is \$100,000 or more you must pay online or by wire transfer. Indicate your payment method and details in the space provided below. If you are making an online payment on or before February 21, 2016 use Online Tax Information system (OTIS) at www.tax.alaska.gov. If you are making a payment on or after February 22, 2016 use Revenue Online (ROL) at online-tax.alaska.gov. See instructions for additional payment details.

<input type="checkbox"/> Wire transfer date _____	<input type="checkbox"/> ROL confirmation # _____	<input type="checkbox"/> OTIS confirmation # _____
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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 a true, correct, and complete return.

Signature	Date
Printed Name	Printed Title
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