

**Dive Fishery Management
Quarterly Assessment**

<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 Assessment

<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

	2015 Quarter in which dive resources were purchased				
Licensed Buyer	<input type="checkbox"/> Jan - Mar	<input type="checkbox"/> Apr - Jun	<input type="checkbox"/> Jul - Sep	<input type="checkbox"/> Oct - Dec	Quarterly tax - due last day of month following quarter of purchase

Assessment Calculation

		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 assessments 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 assessment, 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**

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