

## 2015 Alaska Mining License Tax Return Short Form

Taxpayer Name (Name must be the same as on the mining license application)			Mining License Number		
<input type="checkbox"/> FEIN <input type="checkbox"/> SSN			If fiscal year filer, enter year-end Month _____ Year _____		
Business Name (dba)			Business Phone Number		
Mailing Address <input type="checkbox"/> Check if new address			Return Information (Check if it applies): <input type="checkbox"/> Amended Return (Attach explanation)		
City	State	ZIP Code			
Email Address					
Contact Name	Title	Contact Phone			

**Note:** This form may only be used if the taxpayer has only one mining operation and no non-mining expenses. Otherwise, use Form 662 (long form).

<b>Income</b> (Report all income and expenses in U.S. dollars)		
1. Gross income from mining operation . . . . .	1	
2. Royalties received (from Schedule C, line 2) . . . . .	2	
3. Total income from mining operation (add line 1 and 2) . . . . .	3	

<b>Expenses</b> (No deduction, except depletion, is allowed against royalty income on line 2)		
4. Royalties paid (from Schedule B, line 3) . . . . .	4	
5. Fuel and oil . . . . .	5	
6. Maintenance and repairs . . . . .	6	
7. Salaries and wages . . . . .	7	
8. Transportation costs . . . . .	8	
9. Depreciation expense . . . . .	9	
10. Other expenses (attach schedule) . . . . .	10	
11. Total expenses (add lines 4 through 10) . . . . .	11	
12. Net income before depletion (subtract line 11 from line 3) . . . . .	12	
13. Depletion expense (from Schedule A, line 16). . . . .	13	
14. Taxable income before exemption for new mining operation (subtract line 13 from line 12) . . . . .	14	
15. Exemption for new mining operation (see instructions) . . . . .	15	
16. Net taxable income (subtract line 15 from line 14). . . . .	16	
17. Tax (see instructions) . . . . .	17	
18. Exploration incentive credit (attach Form 665). . . . .	18	
19. Mining business education credit (from Form 662, Schedule EC, line 6) . . . . .	19	
20. Tax before other credits (subtract lines 18 and 19 from line 17) . . . . .	20	
21. Film production tax credit (cannot exceed line 20. Attach certificate or explanation of carry forward) . . . . .	21	
22. Amount paid with extension . . . . .	22	
23. <b>Amended returns only.</b> Amount previously paid. . . . .	23	
24. Net tax due or (overpayment) (subtract lines 21, 22, and 23 from line 20) . . . . .	24	

<input type="checkbox"/> FEIN <input type="checkbox"/> SSN	Taxpayer Name
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<b>Schedule A – Cost Depletion Calculation</b>		
1. Cost or basis of mining property (less residual value) . . . . .	1	
2. Estimated recoverable units at beginning of tax year (include units previously produced, but not sold) .	2	
3. Unit cost (divide line 1 by line 2) . . . . .	3	
4. Number of units sold this tax period . . . . .	4	
5. Cost depletion deduction (multiply line 3 by line 4). . . . .	5	

<b>Schedule A – Percentage Depletion Calculation</b>		
6. Total income from mining operation (from page 1, line 3). . . . .	6	
7. Royalties paid (from Schedule B, line 3) . . . . .	7	
8. Depletion base (line 6 minus line 7) . . . . .	8	
9. Applicable depletion percentage (see instructions) . . . . .	9	
10. Percentage depletion (multiply line 8 by line 9). . . . .	10	
11. Total income from mining operation (from page 1, line 3). . . . .	11	
12. Total expenses (from page 1, line 11). . . . .	12	
13. Net income before depletion (line 11 minus line 12) . . . . .	13	
14. Limitation (multiply line 13 by 50%) . . . . .	14	
15. Enter amount from line 10 or line 14, whichever is less . . . . .	15	
16. Depletion deduction (enter amount from line 5 or 15, whichever is greater, here and on page 1, line 13) .	16	

**Schedule B – Royalties Paid** (See instructions. Report in U.S. dollars)

Name and Address of Each Lessor				Amount Paid
1	Federal ID <input type="checkbox"/> FEIN <input type="checkbox"/> SSN			
	Name			
	Mailing Address			
	City	State	ZIP Code	
				\$
2	Federal ID <input type="checkbox"/> FEIN <input type="checkbox"/> SSN			
	Name			
	Mailing Address			
	City	State	ZIP Code	
				\$
3	Total royalties paid. Add amounts paid and enter here and on page 1, line 4			\$

**Schedule C – Royalties Received** (See instructions. Report in U.S. dollars)

Name and Address of Each Lessee				Amount Received
1	Federal ID <input type="checkbox"/> FEIN <input type="checkbox"/> SSN			
	Name			
	Mailing Address			
	City	State	ZIP Code	
				\$
2	Total royalties received. Add amounts received and enter here and on page 1, line 2			\$

***I declare under penalty of perjury 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	Printed Name and Title	Date
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