

Salmon Enhancement Tax Return



| | | |
|---|---------------|------------------------------|
| <input type="checkbox"/> FEIN <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 Cell |

Type of Return

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

Type of Business

| | | |
|---|--|---|
| Check One | Month/Year salmon purchased: | Please note the different due dates |
| <input type="checkbox"/> Licensed Buyer | Month: _____ Year: 2016 | Monthly tax – due last day of month following month of purchase |
| <input type="checkbox"/> Fisherman | Year salmon exported/sold: 2015 | Yearly tax – due March 31st of following year |

Exempt Purchases

Use this section to report all salmon harvested under a special harvest area entry permit issued under AS 16.43.400.

| Pounds of Salmon | Value of Salmon |
|------------------|-----------------|
| | |

Example: Salmon purchased from government agencies, salmon hatcheries or a fishing derby.

Tax Calculation

| Region | Where Caught | | Purchased or Exported | | Salmon Enhancement Tax | |
|--------|------------------------------|--------------|-----------------------|--------------|------------------------|---------------------------|
| | (A) Pounds | (B) Value | (C) Pounds | (D) Value | (E) Rate | (F) Tax (Column D x E) |
| 1 | Southern Southeast | \$ | | \$ | .03 | \$ |
| 2 | Northern Southeast | \$ | | \$ | .03 | \$ |
| 3 | Prince William Sound | \$ | | \$ | .02 | \$ |
| 4 | Cook Inlet | \$ | | \$ | .02 | \$ |
| 5 | Kodiak | \$ | | \$ | .02 | \$ |
| 6 | Chignik | \$ | | \$ | .02 | \$ |
| 7 | Yakutat | \$ | | \$ | .02 | \$ |
| 8 | Outside | \$ | | \$ | N/A | N/A |
| 9 | Total (add lines 1-8) | \$ | | \$ | N/A | \$ |

(Totals on line 9, columns A and B must equal totals on line 9, columns C and D)

| | |
|---|-------------------|
| 10 Amended and Bonus returns only. Taxes previously paid for this period | \$ () |
| 11 Total Tax Liability (Refund) Due (subtract line 10 from line 9, column F) | \$ |

Note: If your liability is \$100,000 or more, you must pay online using Revenue Online at <http://online-tax.alaska.gov> or by wire transfer.

Check if you are paying by: Revenue Online (confirmation # _____) Wire transfer (date _____)

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

| | | | |
|-----------|--------------|-------|------|
| Signature | Printed Name | Title | Date |
|-----------|--------------|-------|------|

Pay online through Revenue Online at <http://online-tax.alaska.gov> or make check payable to the **State of Alaska**.

If not filing this form through Revenue Online, mail to:
Tax Division, Alaska Department of Revenue, PO Box 110420, Juneau AK 99811-0420
www.tax.alaska.gov • 907.465.2320