Gambling Tax Return

1000 Laurel St.
Milton, WA 98354
253-922-8733 Fax 253-922-2385

RCW 9.46.110, MMC Chapter (5.36)

Business Name: _____

Address: _____

_____

Telephone Number: _____

For Month Ending: _____

DATE DUE: Payment and Tax return due on the 15th day of the month following the end of the succeeding month.

ENCLOSURES REQUIRED: A copy of your Washington State Gambling Commission "Quarterly Report" must be enclosed with the Tax Return filed for the monthls of March, June, September and December.

TAX RETURN INSTRUCTIONS:

1. Tax returns must be completed and returned even if no gambling activity occurred in the month
2. Applicable penalties must be included with payment. See "Penalties" below.
3. Enter gross receipts, allowed deductions, taxable revenue, and the calculated tax for each activity.
4. Enter monthly totals in the "Tax Total" and "Penalty" blocks. Enter your payment amount in the "Total Paid" Block.
5. Complete "Business Activity Change" section (as applicable).
6. Attach required enclosures. (See ENCLOSURES, right).

BUSINESS ACTIVITY CHANGES:

☐ Activities have been discontinued as of _____

☐ Business Ownership Change:
New Owner: _____

Effective Date: _____

☐ Address Change: _____

ACTIVITY	GROSS RECEIPTS	ALLOWED DEDUCTIONS (-) (PRIZE AMT. PAID OUT)	TAXABLE (=) REVENUE	TAX (X) RATE	TAX (=)
BINGO				10%	
RAFFLES				10%	
AMUSEMENT GAMES				2%	
PUNCHBOARDS		NONE ALLOWED		5%	
PULLTABS		NONE ALLOWED		5%	
CARDROOMS		NONE ALLOWED		20%	

SUB TOTAL		
DUE FROM PRIOR QTR.	Penalty	
	Tax	
TOTAL PAID		

INTEREST: 1% PER MONTH OR PORTION THERE OF THAT THE AMOUNT OF TAXES AND FEES PAST DUE.

PENALTIES:

* 10% of monthly Tax total if Tax Return and full payment is received 01 to 10 days late.
* 15% of monthly Tax total if Tax Return and full payment is received 11 to 20 days late.
* 20% of monthly Tax total if Tax Return and full payment is received 21 to 30 days late.
* 25% of monthly Tax total if Tax Return and full payment is received 31 to 60 days late.
* Failure to make payment in full of all tax amounts and penalties within 60 days following the day the tax amount initially became due shall be both a civil and criminal violation.

FILING INSTRUCTIONS

1. Make checks payable to: CITY OF MILTON
2. Sign and date the Gambling Tax Return
3. Enclose a copy of your Washington State Gambling Commission Quarterly Reports as stated above.

CITY OF MILTON
C/O FINANCE OFFICE
1000 LAUREL ST.
MILTON, WA 98354

I declare under penalty of perjury of the laws of Washington State are true and accurate to the best of my knowledge.

_____
SIGNATURE

_____
PRINTED NAME DATE