

# MUNICIPALITY OF ROBERTSDALE, ALABAMA LIQUOR TAX

ACCOUNT NUMBER \_\_\_\_\_

MAIL THIS RETURN WITH REMITTANCE TO:

REPORTING PERIOD \_\_\_\_\_

(This return only for the business shown below).

Total Amount Enclosed
\$ _____

Has a change occurred in Taxpayer Name, Trade Name, Mailing Address, Business Address, or Number of Outlets?  
 \_\_\_Yes \_\_\_No                      Is this a final return? \_\_\_Yes \_\_\_No    If yes, attach explanation. \_\_\_\_\_  
 \_\_\_\_\_

**DIRECTIONS:** Report gross receipts from liquor sales in the City Limits in Column A and in the Police Jurisdiction in Column B.

1. GROSS RECEIPTS FROM LIQUOR SALES

2. DEDUCTIONS:

*NOTE: If using this deduction you MUST provide copies of ABC invoices*

ABC Liquor Tax Credit Computation

A) List total liquor purchases for this reporting period	A)
B) Divide amount in A by 1.56	B)
C) Multiply amount in B by .56	C)

ABC LIQUOR TAX CREDIT - Line 2(C) above \_\_\_\_\_

OTHER ALLOWABLE DEDUCTIONS (specify below)  
 \_\_\_\_\_

3. TOTAL DEDUCTIONS (Total of ABC Liquor Tax Credit and Other allowable deductions above)

4. AMOUNT REMAINING AS A MEASURE OF TAX (Line 1 minus Line 3)

5. AMOUNT OF TAX (Multiply Line 4, Column A by 10% and Column B by 5% )

Column A City Limits - 10%	Column B Police Jurisdiction - 5%

This return must be postmarked by the 15th day of the month following the reporting period for which you are filing to be considered a timely return.

By signing this report I am certifying that this report, including any accompanying schedules or statements, has been examined by me and is to the best of my knowledge and belief, a true and complete report for the period stated.

Date: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

(1) TOTAL TAX DUE (Total of Line 5, Columns A & B)	
(2) PENALTY (10% if not paid by the 15th)	
(3) INTEREST (1% per month)	
(4) DISCOUNT (3% if paid timely)	
(5) LATE FEE (Add \$1.50 if notice mailed)	
<b>TOTAL AMOUNT DUE &amp; ENCLOSED</b>	