

CITY OF LAKE FOREST PARK BUSINESS AND OCCUPATION TAX REPORT

ALL BUSINESSES MUST FILE A TAX REPORT

ACCOUNT NUMBER

NO TAX IS DUE IF GROSS PROCEEDS TOTAL LESS THAN \$5,000.00

Please sign and return regardless of tax due.

NAME
ADDRESS
CITY, STATE,
ZIP

Filing Periods

Due

1 QTR = JAN, FEB, MAR

4/30

2 QTR = APR, MAY, JUN

7/31

3 QTR = JUL, AUG, SEP

10/31

4 QTR = OCT, NOV, DEC

1/31

COLUMN 1 BUSINESS CLASSIFICATION	1	COLUMN 2 GROSS RECEIPT AMOUNT	COLUMN 3 DEDUCTIONS	COLUMN 4 TAXABLE AMOUNT	COLUMN 5 X RATE	COLUMN 6 TAX DUE
1					.002	
2					.002	
3					.002	

PENALTY: 1 to 30 days late add 9 % 31 to 60 days late add 19 % 61 to 90 days late add 29 %	IF NO TAXES ARE DUE FOR THIS PERIOD YOU CAN FAX YOUR SIGNED, DATED FORM TO (206) 957-2830.	LINE A - Total of Column 6	
		LINE B - Penalty	
		LINE C - Overpayment/Underpayment	
		LINE D - Total Tax and Penalty	

Type of Deduction	Explanation	Amount	Examples of the most common exemptions and deductions:
			<ul style="list-style-type: none"> Liquor, beer, and wine sales Manufacturing, selling, or distribution of motor vehicle fuel Cash discounts taken by customers Credit losses or bad debts sustained by customers

MAIL TAX RETURN TO: City of Lake Forest Park
 17425 Ballinger Way NE
 Lake Forest Park, WA 98155-5556
 Telephone(206) 957-2808
 Information/Questions contact: tax@cityoflfp.com

MAKE CHECKS PAYABLE TO: City of Lake Forest Park

STATEMENT BY TAXPAYER

I/we hereby certify under the penalties of perjury that the sum above shown in the amount of tax for which I/we are liable for the period above shown under and computed according to the provisions of the Ordinance. I/we further certify that the information herein given and the amount of the tax liability herein reported are full and true and I/we know the same to be so.

SIGNED: _____

DATE: _____

PRINTED NAME: _____

TITLE: _____

PHONE #: _____

RETURN ORIGINAL SIGNED TAX REPORT

Complete this space if you are **NO LONGER OPERATING IN LFP**

Date Discontinued _____