

# TRANSACTION PRIVILEGE AND USE TAX RETURN STEP-BY-STEP INSTRUCTION SHEET

These instructions should be retained for future reference in completing your transaction privilege and use tax returns.

- 1) If applicable, make any mailing address corrections in this area.
- 2) If you want to cancel your license check this box and indicate reason.
- 3) Check this box if you have no taxes to report for the reporting period.
- 4) Business description: specify the type of business you are reporting taxes for (i.e. rental, retail, construction, etc.).
- 5) Business class: Find your classification codes by referring to the list of codes on the back of this page.
- 6) Gross Income (column 1): Enter the gross income, including tax collected, for each applicable business class. If you report on the <u>cash basis</u>, enter the total amount received, including draws for construction contracting, in the reporting period. If you report on the <u>accrual basis</u>, enter the total amount billed per customer invoices, including progressive billings for construction contracting, in the reporting period.
- 7) Allowable Deductions (column 2): Enter the total deductions from the back of the return for each applicable business class.
- 8) Net Taxable (column 3): Subtract total deductions in column 2 from gross income in column 1 and enter here.
- 9) Tax Rate % (column 4): This is the City of Mesa tax rate which is preprinted on the report form.
- 10) Tax Amount (column 5): Multiply column 3 (net taxable) by column 4 (tax rate) for each business code and enter here.
- 11) Line 7: All use tax is to be entered on this line.
- 12) Line 9: Subtotal all columns here.
- 13) Line 10: If more tax was collected than is due, enter the city portion of the excess tax collected (from Schedule B).
- 14) Line 11: Enter the total of lines 9 and 10.
- 15) Line 12: This is for current late penalty & interest if applicable. Leave this line blank if you want the City to compute and bill you for the penalty and interest. If you want to pay the penalty & interest contact Tax Audit & Collections at 480-644-2051.
- 16) Line 13: Enter the total of lines 11 and 12.
- 17) Line 14: If you received notice from the City of a credit balance, enter the amount to be applied to the tax due. Do not exceed the total tax due. Submit a copy of the City's credit notice with your return.
- 18) Line 15: Subtract line 14 from line 13 and enter that amount here.
- 19) Line 16: Enter the amount of the check.

Make your check payable to the City of Mesa and submit to the City of Mesa with the original tax return. **Do not staple** the check to the return. If no payment is being made, enter zero.

20) Signature/Date line. THIS IS REQUIRED.

## Instructions for back of return

## **Deduction Detail:**

The six columns correspond to the six lines on the front of the return for the business class/description (see step 4, 5).

- 21) Enter the business class codes to match with the corresponding lines on the front of the return.
- 22) Enter the amount of each deduction on the appropriate deduction line for each business class.

To the left of the columns are the preprinted deductions. If a deduction, which you are allowed to claim is not listed, enter the name of the deduction on line 17 though 20 in the space provided and enter the amount in the column relating to the business class.

23) Total Deductions: Add each column and enter the sum at the bottom of the return for each column. Transfer the total of each column to the corresponding line in Column 2 on the front of the return.

### Schedule B

- 24) Excess Tax Collected by Business Class: Enter any excess tax collected by business class. Enter this amount on line 10 on the front page of return.
- 25) Jet Fuel: For jet fuel enter the amount of gallons sold and calculate this amount by .03. Enter this amount on line 10 on the front page of return.

| CODE     | RATE       | ACTIVITY                     | CODE LEGEND<br>DEDUCTION ITEMS | CODE   | ALLOWABLE DEDUCTION ITEMS                               | 6                  |  |  |
|----------|------------|------------------------------|--------------------------------|--|---|--------------------|--|--|
| 0022     |            |                              |                                |  |   |                    |  |  |
| 01       | 1.75%      | Advertising                  | 52,53,64                       | 52   | Discounts and Refunds (If Included in (                 | Gross)             |  |  |
| 02       | 1.75%      | Contracting-prime/           | 62,64,70,71                    | 53   | Bad Debts(If Included in Gross)                         |                    |  |  |
|          |            | Speculative                  |                                | 54   | Sales for Resale (Detail Records Must                   | Be Kept)           |  |  |
| 03       | .1%        | *Mining                      | 52,53,64                       | 55   | Out of State Sales and Leases                           | 1 /                |  |  |
| 04       | 1.75%      | Job Printing                 | 52,53,54,64,65                 | 58   | Sales and Leases of Prosthetics and                     |                    |  |  |
| 05       | 1.75%      | Publishing                   | 52,53,54,64                    |  | Prescription Drugs                                      |                    |  |  |
| 06       | 1.75%      | Transporting for Hire        | 52,53,64                       | 59   | Sales of Motor Vehicle and Use Fuel                     |                    |  |  |
| 07       | 1.75%      | Restaurants/Bars             | 52,53,64,65                    | 62   | Out of City Contracting                                 |                    |  |  |
| 08       | 1.75%      | Leases and Rentals of        | 52,55,58,64,65                 | 63   | Repair Service or Installation Labor                    |                    |  |  |
|          |            | Tangible Personal Property   |                                |  | . 64  | State, County and  |  |  |
|          |            |                              |                                |  | City Tax Collected or Factored (If                      | -                  |  |  |
|          |            | Including Equipment Rentals  |                                |  | -   | Included in Gross) |  |  |
| 09       | 1.75%      | Rental of Real Property      | 53,64                          | 65   | Sales to Qualified Health Care Organi                   | zations            |  |  |
| 10       | 1.75%      | Retail Sales                 | 52 thru 59,63,64,65,75,76,77   | 70   | 35% Reduction of Gross Receipts                         |                    |  |  |
| 12       | 1.75%      | Amusements                   | 53,64                          | 71   | Exempt Sub-contracting Income                           |                    |  |  |
| 13       | 1.75%      | Utilities                    | 53,64,65                       | 75   | 50% of Sales to the United States Gov                   | ernment            |  |  |
| 14       | 1.75%      | Telecommunications (Cable    | 53,64                          | 76   | Sales of Exempt Machinery and Equip                     | ment               |  |  |
|          |            | TV and Communications)       |                                | 77   | Food For Home Consumption                               |                    |  |  |
| 20       | 1.75%      | Use Tax                      |                                | Other D                                      | er Deductions Not Otherwise Classified Must Be Itemized |                    |  |  |
|          |            |                              |                                | (Explained). Use Item Numbers 78 Through 81. |   |                    |  |  |
| *500 000 | tion 5-10- | 432 in City of Mesa Tay Code |                                |  |   |                    |  |  |

\*See section 5-10-432 in City of Mesa Tax Code

| TRANSACTION<br>Mesa-az   |  | VILEGE AND USE T<br>Revenue Collectio<br>Licensing Office<br>55 North Center Str<br>Mesa Arizona 8520<br>(480)644-2316 | ons Operations<br>treet                                       |      |                              | 000XXXXXXX20XX<br>License No. XXXXXX<br>Reporting Period month/year<br>Due Date XX/20/XXXX |                        |                         |           |              |
|--|--|--|---|------|------------------------------|--|------------------------|-------------------------|-----------|--------------|
| Taxpayer Busines   | s Na   | me   | Please indic  | ate  | mailing address              | cha  | nge here.              |                         |           |              |
| Taxpayer C/O<br>Taxpayer Address<br>Taxpayer City/Sta  | P Code   |  |   |      |                              | CANCEL LICENSE:<br>Check here and sign at the<br>bottom to cancel your license.            |                        |                         |           |              |
|  |  |  | SPECIAL NOTICE  |      |                              |  | 2 Date Business Closed |                         |           |              |
|  |  |  | 01 201  |      |                              |  |                        |                         |           |              |
|  |  |  |   |      |                              |  |                        |                         |           |              |
| Check here and sign at the bottom 3<br>if you have no gross receipts to report.                                |  |  |   |      |                              |  |                        |                         |           |              |
|  | 1  |  | Column 1  |      | Column 2                     | -  | Column 3               | Column 4                | Column §  | 5            |
| Business Description   | Line   | Bus. Class   | Gross   |      | Allowable pg<br>- Deductions |  | = Net Taxable          | x Tax<br>Rate 9         | = Tax Amo | ount         |
| 4  | 1  | 5  | 6   |      | $\overline{7}$               |  | (8)                    | 1.75%                   | (10       |              |
|  | 2  |  | $\bigcirc$  |      |                              |  | Ċ                      | 1.75%                   |           | $\square$    |
|  | 3  |  |   |      |                              |  |                        | 1.75%                   |           |              |
|  | 4  |  |   |      |                              |  |                        | 1.75%                   |           |              |
|  | 5  |  |   |      |                              |  |                        | 1.75%                   |           |              |
|  | 6  |  |   |      |                              |  |                        | 1.75%                   |           |              |
| USE TAX (11)   | 7  | 20   |   |      |                              |  |                        | 1.75%                   |           |              |
| TOTAL FROM ADDTL PAGES   | 8  |  |   |      |                              |  |                        | 1.75%                   | (12)      |              |
|  |  |  |   |      |                              |  |                        | 1.75%                   | (13       | $\leftarrow$ |
| 10 (Total from So  |  |  | nedule B) EXCESS CITY TAX COLLECTED/JET FUEL<br>TOTAL TAX DUE |      |                              |  | Plus (+)               |                         | 7         |              |
|  |  | (see instructions) PENALTY & INTERE  |   |      |                              |  | Equals (=)<br>Plus (+) | (15                     |           |              |
|  | (500   | ENTER TOTAL LIABILITY  |   |      |                              |  | (16)                   | $\frown$                |           |              |
|  | 13 ENTER TOTAL LIABILITY   14 (Total from Schedule B) CREDIT TO BE APPLIED |  |   |      |                              |  |                        | Equals (=)<br>Minus (-) | (17       | )            |
|  | 15 ENTER NET AMOUNT DUE  |  |   |      |                              |  |                        | Equals (=)              | (18)      | $\square$    |
| 16 ENTER TOTAL AMOUNT PAID   |  |  |   |      |                              |  |                        |                         | (19       | >            |
| Under penalties of perjury, I<br>knowledge and belief it is tru<br>has any knowledge.<br>20<br>Taxpayer's Sign |  |  | aration of preparer   | (oth |                              |  | ased on all informatio | n of which p            | -         |              |
| Print Name Phone #   |  |  |   |      |                              | Print Paid Prepare ame   |                        |                         |           |              |

A SIGNATURE IS REQUIRED TO MAKE THIS RETURN VALID Return original with remittance in envelope provided. Please make check payable to: CITY OF MESA Complete both sides of form. Mailing Address PO Box 16350 Mesa Arizona 85211-6350 DUE DATE: The due date for the city privilege tax is the 20th of the month following the reporting period. A return is considered timely if received by the last business day of the month. A business day is any day except Friday, Saturday, Sunday, or legal city holiday.

PENALTIES: 1. Failure to File - A penalty of 5% of the tax due will be assessed for each month, or fraction elapsing between the delinquency date of the return and the date on which it is filed. Filing your return on time, whether or not you pay the tax due, will avoid the late filing penatly.

2. Failure to Pay - A penalty of 10% of the unpaid tax will be assessed if the tax is not paid timely.

3. Total Penalty - Total penalties assessed will not exceed 25%.

Jet Fuel

gals. X .03=\_

INTEREST: Mesa's interest rate is the same as the State rate and continues to accrue until taxes are paid. This interest rate is subject to change on a quarterly basis as established by the I.R.S.

CHECK YOUR RETURN: Check the amounts recorded by type of income for each line item as follows.

- \* Itemized deductions equal the total deductions recorded.
- \* Taxable income equals gross income less total deductions.
- \* Tax due is equal to the amount obtained by applying the preprinted tax rate to the taxable income amount.
  - Total tax due equals tax due plus any excess tax collected.

FOR ASSISTANCE, CALL: City of Mesa(480)644-2316 Fax:(480) 644-3999

SCHEDULE A - DETAILS OF DEDUCTIONS: Enter below the deductions and exclusions you used in computing your city transaction privilege tax or use tax. You must keep a detailed record of all deductions and exclusions. Failure to maintain proper documentation and records required by city ordinance may result in their dissallowance. A separate detail of city records and documentation must be maintained only when the income, deductions or exemptions are different from state requirements. Please note: Not all deductions are available to all business classifications.

NOTE: The line numbers at the top of each column below correspond with the line numbers of the business descriptions listed on the front page.

| $\frown$                                      |          | Bus. Class             | Bus. Class                | Bus. Class                      | Bus. Class  | Bus. Class  | Bus. Class |
|---|----------|------------------------|---------------------------|---------------------------------|-------------|---|------------|
| (21)  | Code     |                        |                           |                                 |             |   |            |
| $\bigcirc$                                    |          | LINE 1                 | LINE 2                    | LINE 3                          | LINE 4      | LINE 5  | LINE 6     |
| 1. Total tax collected or factored            |          |                        |                           |                                 |             |   |            |
| (State, county and city)                      | 64       | (22)                   |                           |                                 |             |   |            |
| 2. Bad debts on which tax was paid            | 53       |                        |                           |                                 |             |   |            |
| RETAIL & PERS. PROP. RENTALS                  |          |                        |                           |                                 |             |   |            |
| 3. Sales for resale                           | 54       | $\frown$               |                           |                                 |             |   |            |
| 4. Repair, service, or installation labor     | 63       | $\square \cap \square$ |                           |                                 |             |   |            |
| 5. Discounts and refunds                      | 52       |                        | $\neg \Box \frown \frown$ |                                 | $\square$   | $\cap$  |            |
| 6. Sales to qualified health care org.        | 65       | $\nabla \nabla$        |                           | $\square \land \square \square$ | $\triangle$ |   |            |
| SALES TO U.S. GOVERNMENT                      |          | F                      | пппі                      | пппп                            |             | $\Box \Box $ |            |
| 7. By retailer 50% deductible                 | 75       | $\cup I \cup$          |                           | $  \cup       \setminus$        | $\nabla$    | $\vee$ /  |            |
| 8. By manufacturer and repairer               |          | $\sim$                 |                           |                                 |             |   |            |
| (100% deductible)                             | 75       |                        |                           |                                 |             |   |            |
| 9. OUT-OF-STATE SALES                         |          |                        |                           |                                 |             |   |            |
|   | 55       |                        |                           |                                 |             |   |            |
| CONSTRUCTION CONTRACTING                      |          |                        |                           |                                 |             |   |            |
| 10. 35% reduction of gross receipts           | 70       |                        |                           |                                 |             |   |            |
| 11. Exempt sub-contracting income             | 71       |                        |                           |                                 |             |   |            |
| 12. Out-of-City Contracting                   | 62       |                        |                           |                                 |             |   |            |
| OTHER DEDUCTIONS                              |          |                        |                           |                                 |             |   |            |
| 13. Sales of motor vehicle and use fuel.      | 59       |                        |                           |                                 |             |   |            |
| 14. Sales of exempt machinery & equip.        | 76       |                        |                           |                                 |             |   |            |
| 15. Prescription drugs/prosthetics            | 58       |                        |                           |                                 |             |   |            |
| 16. Food for home consumption                 | 77       |                        |                           |                                 |             |   |            |
| 17. Other (explain)                           | 78       |                        |                           |                                 |             |   |            |
| 18. Other (explain)       19. Other (explain) | 79<br>80 |                        |                           |                                 |             |   |            |
| 20. Other (explain)                           | 81       |                        |                           |                                 |             |   |            |
| Total Deductions (23)                         | <b>.</b> |                        |                           |                                 |             |   |            |
| SCHEDULE B                                    |          |                        |                           |                                 |             |   |            |
| Excess Tax Collected by Business Class        | (24)     |                        |                           |                                 |             |   |            |
| Allowable Credits by Business Class           |          |                        |                           |                                 |             |   |            |
|   |          |                        |                           |                                 |             |   |            |

(25) +>> transfer this amount to line 10 on front page.

## 000XXXXXXXXX20XX

License No. Reporting Period Due Date

XXXXXXX month/year XX/20/XXXX

#### POSTMARKS ARE NOT EVIDENCE OF TIMELY FILING.