

# City of Tuscaloosa

## WINE TAX REPORT

ACCOUNT ID: \_\_\_\_\_

MAIL THIS RETURN WITH REMITTANCE TO:

CITY OF TUSCALOOSA, REVENUE DIVISION  
 P.O. BOX 2089  
 TUSCALOOSA, AL 35403  
 PHONE: (205)248-5200 FAX: (205) 248-5793  
 EMAIL: revenueoffice@tuscaloosa.com

FEIN \_\_\_\_\_  
 BUSINESS NAME \_\_\_\_\_  
 DBA \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 EMAIL \_\_\_\_\_

INDICATE ANY CHANGE BELOW:

- Additional Forms Needed  
 Change of Location \_\_\_\_\_  
 Mailing Address Change \_\_\_\_\_  
 Out of Business Date \_\_\_\_\_

Reporting Period \_\_\_\_\_

	(A)	(B)	(C)	(D)	(E)
Type of Tax/Tax Area	Gross Taxable Amount	Total Deductions	Net Taxable (Column A – Column B)	Tax Rate	Gross Tax Due (Column C x Column D)
City				.07	
Police Jurisdiction				.035	

This return must be postmarked by the 20th day of the month following the reporting period for which you are filing to be considered a timely return. Failure to do so will result in an assessment of 10% penalty and interest using current APR rate. Please call our office for current rate or visit this website:  
<https://revenue.alabama.gov/assessments/quarterly-interest-rates>.

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.

Printed Name \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>(1) Total Tax Due</b> (Total of Column E)	
<b>(2) Penalty</b> (Line 1 X 10%)	
<b>(3) Interest</b>	
<b>(4) Net Amount Due</b> (Line 1, if delinquent 1+2+3)	
<b>(5) Credit</b> (Attach Documentation)	
<b>(6) Total Amount Due &amp; Enclosed</b> (Line 4-5)	