

\*\* PLEASE USE BLUE OR BLACK INK \*\*



City of Tucson  
License Section  
255 W. Alameda  
Tucson, AZ 85701  
(520) 791-4566

# Tax Return

Privilege, Use, Public Utility,  
Room Surtax, Transient Rental

Make Check Payable to: City of Tucson  
Mail to: City of Tucson, Collections,  
PO Box 27320, Tucson, AZ 85726



CITY LICENSE NO.					
0	0	0	0	0	6
PERIOD ENDING					
0	5	1	5		
CYCLE					
MTH					
Office Use					

Mixture of MRRA and Prime Contracting Jobs  
Taxes on materials for MRRA were paid to vendor  
when purchased.

## EXAMPLE 6

THIS RETURN IS DUE ON  
THE 20<sup>TH</sup> OF THE MONTH

Complete Both Sides of Form			Column 1	Column 2	Column 3	Col. 4	Column 5
Line	Business Activity	Bus. Class Code	Gross Receipts / Use Taxable Purchases	From Sch A on back - Deductions	= Net Taxable	X Tax Rate	= Tax Amount
1	Use Tax	99		N/A	0		0
2	Contracting	15	10573023	4911869	5661154	2.00%	113223
3	Retail Sales	17		0	0	2.00%	0
4				0	0	0	0
5	ENTER EXCESS CITY TAX COLLECTED (From SCHEDULE C on the back)				Plus (+)		0
6	TOTAL TAX DUE (Add lines 1 through 5)				Equals (=)		113223
7	PENALTY AND INTEREST (See instructions below)				Plus (+)		
8	ENTER TOTAL LIABILITY (Add lines 6 plus 7)				Equals (=)		113223
9	ENTER CREDIT BALANCE TO BE APPLIED (From SCHEDULE B on back)				Minus (-)		0
10	ENTER NET AMOUNT DUE (Subtract line 9 from line 8)				Equals (=)		113223
11	Enter Total Amount Paid						113223

Under penalties of perjury, I declare I have examined this return, including the accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete. The declaration of the paid preparer is based upon all information of which the preparer has any knowledge.

Taxpayer's Signature	Today's Date	Paid Preparer's Signature
Printed Name	Phone Number	Printed Paid Preparer's Name

**A SIGNATURE IS REQUIRED TO MAKE THIS RETURN VALID**  
Return original with remittance in envelope provided, or pay in person at 255 W. Alameda, 1<sup>st</sup> Floor (City Hall). Overnight deliveries should also be sent to this address.

- PENALTIES:**
- Failure to file -- A penalty of 5% of the tax due will be assessed for each month, or fraction thereof, elapsing between the delinquency date of the return and the date received.
  - Failure to Pay -- A penalty of 10% of any unpaid tax will be assessed if the tax due is not paid on or before delinquency date.
  - Total Penalty -- Combined Failure to File and Failure to Pay penalties assessed will not exceed 25%.

**INTEREST:** Taxes unpaid after the delinquency date will be assessed interest at the current rate per month until paid. Interest may not be waived or abated.

TR0712



**SCHEDULE A – Details of Deductions:** All deductions and exemptions used in computing City transaction privilege tax must be entered below. Detailed records supporting all deductions and exemptions claimed must be maintained. Failure to maintain supporting records may result in the disallowance of claimed amounts.  
**Please note:** Not all deductions are available for all business classifications.  
**SCHEDULE B – Credit Details:** List credits to be used with this return. Documentation must be attached.  
**SCHEDULE C – Excess Tax Collected:** List the excess tax collected by taxable activity.

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

SCHEDULE A Deduction Description	Doc Code	Line 2	Line 3	Line 4
		Business Class Code	Business Class Code	Business Class Code
US Government	10			
Exempt Hospital	14			
Out-of-State Sales	15			
Retail Service Labor	16			
Sales for Resale	17			
Discount and Refunds	18			
Trade-In Allowance	19			
Bad Debts (on which tax was paid)	20			
Motor Fuel	21			
Tax Collected or Factored	22			
Food for Home Consumption	23			
Capital Equipment	24			
Prescriptions / Prosthetics	25			
DMAFB	29			
Delivery / Freight-Out	30			
Code 20 Tax-PUT	36			
Other (Explain) <b>MRRA</b>		5 0 5 0 0 0		
<b>Transient Rental</b>				
Over 30 Days	28			
Bed Tax (\$1) Amount	37			
<b>Construction Contracting</b>				
Out-of-City Contracting	01	9 0 0 0 0 0		
Land Original Cost	02			
Subcontracting Income	03			
Tax Collect/Factored	04	4 5 8 5 5 5		
35% Standard Contracting	05	3 0 4 8 3 1 4		
<b>TOTAL DEDUCTIONS (Copy to Front)</b>		4 9 1 1 8 6 9	0	0
<b>SCHEDULE B Credit Details (must attach documentation)</b>				
1. Accounts Receivable Credit	B			
2. Speculative Builder Credit for City Taxes Paid by the Contractor	B			
<b>Total Schedule B</b> (copy total to front, line 9)				0
<b>SCHEDULE C Excess Tax Collected</b>				
Excess Tax by Taxable Activity	C			
<b>Total Schedule C</b> (copy total to front, line 5)				0