JEFFERSON COUNTY, ALABAMA ALCOHOLIC BEVERAGE TAX RETURN

Required by Acts 1965-388, 1966-95 & 1979-747

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.

Taxpayers required to file this return are also required to file the <u>SALES TAX(ST) AND SPECIAL REVENUE</u> <u>SALES TAX(SRST) RETURNS.</u>

This tax cannot currently be filed electronically.

	Business Na	me				
Business Trade Name/DBA Business Mailing Address						
i 1 i	This tax is in addition to all other taxes and licenses now imposed. It is levied on the sale of alcoholic, spirituous, vinous, and fermented liquor, except malt or brewed beverages of an alcoholic content not in excess of 4% by weight and 5% by volume. This includes whiskey, gin, brandy, rum, vodka, cocktails, and all other alcoholic beverages.			Enter Jefferson County Account Number Below		
1	For the month of			Enter FEIN or S	ocial Security	Number Below
	Rate Type		(A) Gross Sales		(B) Tax Rate	(C) Tax Due
) (Gross sales of hard liquor				0.06	
fo	nis return must be postmarked by the 15t llowing the reporting period for which y nsidered a timely return.	(2) TOTAL GROSS TAX DUE Total of Column C				
By	By signing this return, I am certifying this return, including any accompanying schedules or statements, have been examined by me and is, to the best of my knowledge and belief, a true and correct return for the period stated.		(3) PENALTY – FAILURE TO FILE – If filed late, 20% of total tax (Line 2) or \$15.00, whichever is greater			
			(4) INTEREST – If filed late, ½ of 1% (0.005) of total tax (Line 2) for each month, or part of month late from due date of tax			
	Please Print Name Title		(8) TOTAL AMOUNT DUE AND ENCLOSED			
				Make check pay	able to:	
	Signature	S	COTT MOORE, D	IRECTOF	R	
	Phone Number	Email Address	Mail to: JEFFERSON COUNTY DEPARTMENT OF REVENUE PO BOX 830710 BIRMINGHAM, AL 35283-0710			
ore m	ailing your return be sure to do the follo	wing:		directed to the Jefferson 3-325-5171 or email at rev		
	mber to file your corresponding Sales Ta	_	s Tax Returns by the 20 th .			
Sign,	date and include your contact information	on.				
Ínclud	le your payment if any tax is due.					