

**COUNTY OF MORGAN, ALABAMA  
TAX RETURN FORM FOR  
CONSUMER USE TAX**

MAIL THIS RETURN WITH REMITTANCE TO:  
MORGAN COUNTY SALES TAX OFFICE  
P.O. BOX 1848  
DECATUR, ALABAMA 35602  
PHONE: (256) 351-4619

MORGAN COUNTY Account Number: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/ST/Zip: \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED**  
  
**\$**

This return is for the month/year of \_\_\_\_\_ and must reach the sales tax office on or before the 20<sup>th</sup> day of the month succeeding the month covered by this return.

Type of Tax / Tax Area	(A) Gross Taxable Amount**	(B) Total Deductions** (See Table Below)	(C) Net Taxable** (Column A – Column B)	(D) Tax Rate	(E) Gross Tax Due** (Column C x Column D)
<b>CONSUMER USE TAX</b>	<b>NO DISCOUNT</b>	<b>NO DISCOUNT</b>	<b>NO DISCOUNT</b>		<b>NO DISCOUNT</b>
Farm Mach. & Mfg.				0.375%	
Auto Vehicle				0.500%	
Vend Food				0.750%	
General				1.000%	

\*\*Negative in any column requires a Petition for Refund and the original tax return form for the month/year.

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. Cancellation postmark will determine timely filing. Failure to timely file will result in loss of discount. Failure to file is 10% or \$50.00 –whichever is greater. Failure to pay is 10%. Interest is current APR. Please call our office for current APR rate, or visit this website: [revenue.alabama.gov/assessments/quarterlyinterest-rates](http://revenue.alabama.gov/assessments/quarterlyinterest-rates). A remittance for the total amount due made payable to the taxing jurisdiction must be submitted with this report. This report should be submitted on a monthly basis unless you have requested and been approved for a different filing frequency. Any credit for prior overpayment must be approved in advance by the taxing jurisdiction.

TOTAL TAX DUE (Total of Column E)	
PENALTY (Item 1 x 10.0%)	
INTEREST (Calculated according to Section 40-1-44, Code of Alabama 1975)	
<b>TOTAL TAX DUE</b>	

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.

SIGNED \_\_\_\_\_

DATE \_\_\_\_\_

**STANDARD DEDUCTION SUMMARY TABLE\***  
(SUMMARY BELOW MUST BE COMPLETED TO CORRESPOND WITH TOTAL DEDUCTIONS ON FRONT OF TAX REPORT)

TYPE OF TAX	WHOLESALE SALES	AUTO TRADE INS	LABOR/NONT AXABLE SERV	SALES DELIV. OUTSIDE	JURIS SALES TO GOVT OR ITS AGENCIES	SALES OF GAS OR LUBE OILS	OTHER ALLOWABLE DEDUCTIONS**	
<b>TOTAL DEDUCTIONS</b>								

\*Please provide documentation for this category.