

**TOWN OF TRINITY, ALABAMA
TAX RETURN FORM FOR
SALES TAX, SELLERS USE TAX,
CONSUMER USE TAX**

MAIL THIS RETURN WITH REMITTANCE TO:

TOWN OF TRINITY
P.O. BOX 302
DECATUR, ALABAMA 35602
PHONE: (256) 351-4619

TRINITY Account Number: _____

TOTAL AMOUNT ENCLOSED

\$

Name: _____

Address: _____ City/ST/Zip: _____

This return is for the month/year of _____ and must reach the sales tax office on or before the 20th 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)
SALES/SELLERS USE TAX					
Automotive				0.750%	
General				4.000%	
Farm				0.750%	
Manufacturing Machine				0.900%	
Amusement				4.000%	
Vending				4.000%	
Auto Vehicle withdrawn at \$5.00 each per year (Auto Dealers Only)			_____	\$5.00	
CONSUMER'S USE TAX	NO DISCOUNT	NO DISCOUNT	NO DISCOUNT		NO DISCOUNT
Automotive				0.750%	
General				4.000%	
Farm				0.750%	
Manufacturing Machine				0.900%	
RENTAL & LEASING TAX					
Automotive				0.750%	
General				4.000%	

**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. 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.

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.

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)	
DISCOUNT (*If submitted prior to filing deadline)(5% on \$100.00 or less, 2% over \$100.00)	
NO DISCOUNT FOR CONSUMER USE TAX	
TOTAL TAX DUE	

SIGNED _____

DATE _____

STANDARD DEDUCTION SUMMARY TABLE*
(SUMMARY BELOW MUST BE COMPLETED TO CORRESPOND WITH TOTAL DEDUCTIONS ON 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**	
TOTAL DEDUCTIONS								

*Please provide documentation for this category.