



QUARTERLY SURVEY OF SELECTED NON-PROPERTY TAXES

DUE DATE:

RETURN TO:

U.S. Census Bureau
1201 East 10th Street
Jeffersonville, IN 47132-0001

Need help or have questions?

- **Visit**
census.gov/govs/qtax
- **Call**
1-866-880-9010 weekdays,
7AM to 5PM ET
- **Email**
govs.qtax@census.gov

In correspondence pertaining to this report, please refer to the User ID below the address box.

REPORT ONLINE: It's fast and secure. Respond to this survey via the Internet at the following Web address using the supplied User ID and Password: respond.census.gov/f73 →

User ID:

Password:

GENERAL INSTRUCTIONS

Before filling out this form, please read carefully each part and all related definitions and instructions.

Note especially:

1. Report figures for the calendar quarter named in the form title.
2. You may report on either a cash or accrual basis.
3. Do **not** delay reporting to await final figures, if reasonable estimates can be supplied on a preliminary basis.
4. PLEASE COMPLETE ALL ITEMS ON THE FORM. If some items do not apply to this government, enter zero ("0") and specify those items as "not applicable" in (3) REMARKS.
5. To report revisions to any of the prior seven quarters, call 1-866-880-9010.
6. Use a black or blue ballpoint pen. Do not use pencil or felt-tip pen.

1 Is the addressee title/department and mailing address the same as shown in the address label?

Mark "X" only one box.

Yes – Go to **2**

No – Enter correct information below

Addressee Title or Department

ATTN:

Street 1

Street 2

City State Zip Code



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HOW TO REPORT DOLLAR FIGURES



CORRECT marking example – Please print all information clearly in ordinary characters. (Use care to keep characters in their respective boxes.)

\$Bil.	Mil.	Thou.	Dol.
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	1 2 3	4 5 6	7 8 0

INCORRECT marking example – Do not put slashes through "0" or "7".

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			7 8 9 0

2 What was the amount of tax collections for the following selected taxes imposed by this government for the quarter ending

Report zero for any item that has no collection for this quarter.

Include

- Collections during the quarter from all levies for all funds of this government and its agencies
- Taxes collected for this government by another government or authorized agency
- Current and delinquent amounts, penalties, and interest

Exclude

- Any taxes collected on behalf of other governments
- Shares of taxes imposed by another government

A. General sales and gross receipts taxes

Include

- Sales and use taxes
- Taxes on goods and services, measured as a percent of sales or receipts, or as an amount per unit sold (e.g., gallon, package, etc.)
- Only taxes imposed by this government

Exclude

- Taxes imposed on the sale of particular commodities, businesses, or services (e.g., hotel/motel, car rental, amusements, etc.)
- Sales tax distributions for revenue sharing from State or from other governments T09

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B. Local individual income taxes

Include

- Taxes on individuals measured by net income and taxes on special types of income (e.g., interest, dividends, income from intangible property, etc.)

Exclude

- Income tax distribution for revenue sharing from the State or from other governments T40

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C. Local corporation net income taxes

Include

- Taxes on corporations and unincorporated businesses (when taxed separately from individual income), measured by net income, whether on corporations in general or on specific kinds of corporations, such as financial institutions T41

\$Bil.	Mil.	Thou.	Dol.
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3 Use this space for any explanations that may be essential in understanding the reported data.

Include

- Any significant changes occurring within the last quarter
- Any difficulties encountered in completing this form
- Identify and list all items that are "not applicable" for this government

4 Who should be contacted to answer questions about data reported on this form?

Name of contact person - Please print

Title of contact person - Please print

Area code and phone number

Extension

Area code and fax number

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Email Address - Please print

Date form was completed
(MM) (DD) (YYYY)

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**Thank you for completing this form.
Retain a copy of the completed questionnaire for your records.**

NOTE: The U.S. Census Bureau receives its authorization to conduct this survey from Title 13, United States Code, Section 182. This form has been approved by the Office of Management and Budget (OMB) and given the number 0607-0112. Please note the number displayed in the upper right-hand corner of this form. Display of this number confirms that we have approval from OMB to conduct this survey. If this number was not displayed, under the Paperwork Reduction Act, we could not request your participation in this voluntary survey. Information provided on this questionnaire compiled from or customarily provided in public records are exempt from confidential treatment as cited in Title 13, United States Code, Section 9.

Please note that this is a national form that applies to governments with wide differences in the size of their service areas, the amount of population served, and the extent and complexity of their activities. Public reporting burden for this collection of information is estimated to vary from 10 minutes to 1 hour per response, with an average of 20 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Paperwork Project 0607-0112, U.S. Census Bureau, 4600 Silver Hill Road, AMSD-3K138, Washington, DC 20233. You may e-mail comments to Paperwork@census.gov; use Paperwork Project 0607-0112 as the subject.



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