Approved OMB No. 1651-0055 Exp. 03/31/2015

						<u>'</u>	
DEPARTMENT OF HOMELAND SECURITY U.S. Customs and Border Protection			1. Identifying Number EIN/IRS Number CBP Number SSN				
HARBOR MAINTENANCE FEE QUARTERLY SUMMARY REPORT			2. Name of Company or Individual				
19 CFR 24.24			3. Complete Mailing Address				
SEND TO: U.S. Custom Office of Ad 6650 Teleco Indianapolis	ministration, Revenue <mark>[</mark> m Drive		Check h	nere if addre	ess has changed	since last filing.	
4. REPORTING PERIOD				ry 1st - March 31st) 3 (July 1st - September 30th)			
Year	Quarter (Select Only One)	2 (April 1st - June 30		•	, ,		
Type of Shipment With Class Code	5. Value of Shipments	6. Value of Exemptions (from corresponding columns A to D of line 15)		(colu	7. et Value mn 5 less lumn 6)	8. HMF Due (multiply the amounts in column 7 by appropriate rate)	
A. Domestic Movements 503							
B. FTZ Admissions 505							
C. Passengers 504							
D. Total Column Value (A, B, & C)	\$	\$		\$			
9. Total HMF Due (Total of	f Lines 8A through 8C)					\$	
ITEMIZATION OF EXEMPTIONS	A. Domestic Movements	B. FTZ Admissions		C. Passenger Movements		D. TOTAL (A, B, & C)	
10. Exempt Port							
 Inland Waterway Fuel Tax 							
12. Intraport							
13. U.S. Mainland-State/ Possession/Territory							
14. Other							
15. TOTALS (10-14) (Also enter amounts in corresponding boxes above).							
accurate to the best of m	· -	at the above	information rega	rding the H			
Signature				1.5 =	Date		
17. Preparer's Name	18. Phone Number (country code, if applicable)						
19. Email Address		20. Fax Number					

Order 9397 and Pub. L. 99-662. The identification number provides unique identification of the party liable for the payment of the Harbor Maintenance Fee. The number will be used to compare on this form with information submitted to the Government on other forms required in the course of shipping, exporting, or importing merchandise, which contain the identification number, e.g., the SED, Vessel Operation Report, to verify that the information submitted is accurate and current. Failure to disclose an identification number may cause a penalty pursuant to 19 CFR 24.24(h).

PAPERWORK REDUCTION ACT NOTICE: This request is in accordance with the Paperwork Reduction Act. We ask for the information in order to carry out the Harbor

PAPERWORK REDUCTION ACT NOTICE: This request is in accordance with the Paperwork Reduction Act. We ask for the information in order to carry out the Harbor Maintenance Revenue provisions of the Water Resource Development Act of 1988. We need it to ensure that the trade community is complying with this Act, and to allow CBP to determine if the correct amount of Harbor Maintenance Fee (HMF) is collected. It is mandatory. The estimated average burden associated with this collection of information is 30 minutes per respondent plus 10 minutes recordkeeping depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to U.S. Customs and Border Protection, Asset Management, Washington, DC 20229, and to the Office of Management and Budget, Paperwork Reduction Project (1651-0055), Washington, DC 20503.

FORM INSTRUCTIONS

(Refer to 19 CFR 24.24 for up-to-date information on the Harbor Maintenance Fee and for a list of updated ports where the fee is applicable.)

The following are specific instructions for most of the items on the form. Items that have no instructions are self-explanatory. Domestic movements,
Foreign Trade Zone (FTZ) admissions, passenger movements, or any combination of these may be declared on one form provided that the name of
the company and the identifying number are the same for all declared.

- **Box 1. (Identifying Number)** Individual summary reports should contain only one identifying number. This does not preclude filing more than one summary report for one identifying number. The identifying number must correspond to the name in Box 2. Check the appropriate box to indicate the type of identifying number being used. The identifying number should correspond to the following:
 - Domestic Movements Shipper's Internal Revenue Service (IRS) Number of Social Security Number (SSN) listed on the Vessel Operation Report (U.S. Army Corps of Engineers Form 3925).
 - FTZ Admissions Applicant for Admission to a Foreign Trade Zone's Internal Revenue Service (IRS) Number, CBP Number, or Social Security Number (SSN) that corresponds to the name found in Box 24 of CBP Form 214.
 - Passenger Movements Vessel Operator's Internal Revenue Service (IRS) Number, CBP Number, or Social Security Number (SSN).
- Box 2. (Name of Company or Individual) Enter the following information:
 - Domestic Movements Shipper listed on the Vessel Operation Report (U.S. Army Corps of Engineers Form 3925).
 - FTZ Admissions Applicant Firm Name listed on the Application for Foreign Trade Zone Admission and/or Status Designation Form (CBP Form 214, Box 24).
 - Passenger Movements Operator of the passenger-carrying vessel.
- **Box 3. (Address)** Street address or P.O. Box, city, state, and zip code where company or individual may be contacted.
- **Box 4.** (Reporting Period) Enter the four-digit year and select the appropriate quarter. Check only one box. A separate summary report is required for each quarter reported.
- Box 5. (Value of Shipments) Enter the total value for each shipment type for the reporting period listed in Box 4. Total column value is calculated automatically in Box 5D. Values shall include but are not limited to:
 - Domestic Movements (5A) Total value at the time of loading. Value shall be Free Alongside Ship (FAS) value, which includes selling price, inland freight, insurance, and all other charges to transport the cargo to the dock alongside the vessel.
 - FTZ Admissions (5B) Total entered value listed on the Application for Foreign Trade Zone Admission and/or Status Designation Form (CBP Form 214, Box 21).
 - Passenger Movements (5C) Actual charge for transportation paid by the passengers (or the prevailing charge for comparable service if no actual charge is paid). HMF is paid only once per journey for each passenger. Crew members are not subject to HMF.
- **Box 6.** (Value of Exemptions) Exemptions are to be itemized on Lines 10 through 14. Totals will automatically calculate in Boxes 6A through 6C. Total column value will calculate automatically in Box 6D.
- **Box 7. (Net Value)** <u>Net Value</u> is calculated automatically in Boxes 7A through 7C. The net value is calculated by subtracting Boxes 6A through 6C from Boxes 5A through 5C, respectively.
- **Box 8. (HMF Due)** <u>HMF Due</u> is calculated automatically in Boxes 8A through 8C. The rate is 0.0004 (0.04%) through December 31st, 1990 and 0.00125 (0.125%) beginning January 1st, 1991.
- Box 9. (Total HMF Due) Total of lines 8A through 8C. Remit a check or money order payable to U.S. Customs and Border Protection to the address on this form or submit the form and payment electronically via Pay.gov. A valid Pay.gov account must be created by CBP before forms and payments can be submitted electronically. To request an account, send an email to hmf@dhs.gov with the company information and the contact information for the individual that will be responsible for submitting the forms and payments.
- * Payments must be received no later than 31 days after the close of the quarter being paid. Failure to submit payments timely will result in interest assessments on the total amount of the late payment.

ITEMIZATION OF EXEMPTIONS

Only one exemption per movement may be claimed. Figures inserted in Boxes 10 through 15 shall represent quarterly totals. All exemptions are subject to review and verification by CBP. Supporting documentation shall be submitted to hmf@dhs.gov each quarter for all filings that include exemptions.

- **Box 10. (Exempt Port)** Total value of all shipments loaded and/or unloaded at an exempt port. Enter the total value for each type of movement (domestic, FTZ admission, and/or passenger) in its respective column. Values will be automatically entered into their respective boxes in Column 6
- **Box 11. (Inland Waterway Fuel Tax)** Total value of shipments transported by vessels using fuel subject to the Inland Waterway Fuel Tax. Applies only to domestic movements.
- **Box 12. (Intraport)** Total value of cargo moved within a single CBP port. Applies only to domestic movements.
- **Box 13. (U.S. Mainland/Possession/Territory)** Total value of the following:
 - Cargo, other than Alaskan crude oil, loaded on a vessel in a port in the U.S. mainland for transportation to Alaska, Hawaii, or any possession of the U.S. for ultimate use or consumption in Alaska, Hawaii, or any possession of the U.S.
 - Cargo, other than Alaskan crude oil, loaded on a vessel in Alaska, Hawaii, or any possession of the U.S. for transportation to the U.S. mainland for ultimate use or consumption in the U.S. mainland.
 - Cargo, other than Alaskan crude oil, loaded on a vessel in Alaska, Hawaii, or any possession of the U.S. and unloaded in the state or possession in which loaded.
 - * U.S. mainland includes the 48 contiguous states and the District of Columbia.
 - * The U.S. possessions and territories include the following:

American Samoa Northern Marianna Islands including: Agrihan Baker Island Guam Aguijan Howland Island Guguan Jarvis Island Pagan Johnston Atoll Rota Kingman Reef Saipan Midway Tinian Palmyra Island Puerto Rico U.S. Virgin Islands Wake Island

Box 14. (Other) - Total value of cargo, for each type of movement, subject to the following exemptions:

- Cargo entering the U.S. in-bond for transportation and direct exportation to a foreign country. This does not include cargo for which a formal entry or warehouse entry is filed or cargo which is admitted into a Foreign Trade Zone (FTZ).
- Fish and other aquatic animal life caught by a vessel, and not previously landed on shore, regardless of the extent to which is has been processed.
- Passengers transported on ferries. Ferries are defined as vessels engaged primarily in the transport of passengers and their vehicles (if applicable) between ports in the U.S. or between ports in the U.S. and ports in Canada or Mexico. The vessel must arrive in the U.S. on a regular schedule during its operating season.

Box 16. (Certification) - Preparer should sign and date this form and fill in Boxes 17, 18, 19, and 20 (if applicable).