

**CITY OF GATLINBURG, TENNESSEE - AMUSEMENT TAX RETURN**

REPORT FOR MONTH OF \_\_\_\_\_, 2016

**CUSTOMER COPY**

**IMPORTANT PLEASE READ INSTRUCTIONS BELOW CAREFULLY BEFORE COMPLETING FORM.**

YOUR TAXES BECOME DELINQUENT THE 21ST DAY OF THE MONTH FOLLOWING THE PERIOD COVERED.

ON THE FORMS ENCLOSED ENTER MONTH COVERED. YOUR AMUSEMENT RECEIPTS, TOTAL TAX DUE AND ANY PENALTY AND INTEREST DUE. TOTAL LINES 4,5, AND 6 AND ENTER THE TOTAL AMOUNT IN LINE 7

FILL OUT THE THREE COPIES. DETACH TOP COPY, SIGN THE COPIES AND RETURN LAST TWO COPIES WITH YOUR PAYMENT

FOR QUESTIONS OR INFORMATION PLEASE CALL (865) 436-1405

TO: CITY OF GATLINBURG  
P.O. BOX 5  
GATLINBURG, TN 37738

PLEASE PRINT BUSINESS NAME AND ADDRESS BELOW IF BLANK OR INCORRECT.

1) Total Amusement Receipts for Month	
2) Less Exempt Transactions (List on back)	
3) Net Proceeds (Line 1 minus Line 2)	
4) Total Amusement Tax (2% of Line 3)	
5) Penalty (1/2% of tax for each 30 days or fraction thereof delinquent.	
6) INTEREST, if filed late, add 6% per annum of line 4.	
7) Total amount due (Sum of lines 4,5, and 6)	

Print Business Name and Account Number

**Please retain this copy for your records  
Return Other 2 Copies to the City of Gatlinburg**

**Customer Copy**

**CITY OF GATLINBURG, TENNESSEE - AMUSEMENT TAX RETURN**

Print Business Name and Account Number

REPORT FOR MONTH OF \_\_\_\_\_, 2016

Copy 1 - Please Return Copy 1 and 2 to City

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CITY OF GATLINBURG  
P.O. Box 5  
Gatlinburg, TN 37738

SIGNATURE

**City Copy #1**

**CITY OF GATLINBURG, TENNESSEE - AMUSEMENT TAX RETURN**

Print Business Name and Account Number

REPORT FOR MONTH OF \_\_\_\_\_, 2016

Copy 2 - Please Return Copy 1 and 2 to City

1) Total Amusement Receipts for Month	
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CITY OF GATLINBURG  
P.O. Box 5  
Gatlinburg, TN 37738

SIGNATURE

**City Copy # 2**