



Internal Services Agency

Department of Finance

Tax Collection & Licensing Division

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County of Sacramento

TRANSIENT OCCUPANCY TAX RETURN

HOTEL NAME _____	BUSINESS NAME _____
ADDRESS _____	ADDRESS _____
CITY/STATE _____	CITY/STATE _____
	BUSINESS LICENSE NUMBER _____

Reporting Period: _____

Due Date: _____

Delinquent Date: _____

General Information

- A. File return even though no tax may be due.
- B. Retain all records substantiating this return for three years.
- C. Report changes of ownership immediately.
- D. The tax is due on or before the last day of the month following the reporting period in which it was collected.

IF THE TAX IS NOT PAID BY THE DUE DATE, IT BECOMES DELINQUENT AND A PENALTY OF TEN PERCENT (10%), PLUS INTEREST OF ONE AND ONE HALF PERCENT (1 ½ %) IS DUE.

RENTAL REPORTING DATA:

1. Gross Rent for all Rooms		\$ _____
Less: Rent from Permanent Residents	(_____)	
Less: Rent from Government Employees	(_____)	
Total Deductions		(_____)
2. Net Taxable Rent		\$ _____
3. Tax (12% of Line 2)		\$ _____
4. Penalty (10% of Line 3)		\$ _____
5. Interest (1 ½% of Line 3)		\$ _____
6. TOTAL PAYMENT ENCLOSED (Sum of Lines 3, 4, and 5)		\$ _____

I declare under penalty of perjury, that the foregoing statements are true, correct, and complete to the best of my knowledge.

_____	_____	_____	_____
Preparer Name	Title	Phone	Date

Make checks payable to: Sacramento County Department of Finance. **Mail return and payment to:** County of Sacramento, Business License Section, 700 H Street, Room 1710, Sacramento, CA 95814.

If you have questions regarding this form or the Transient Occupancy Tax, please contact staff at 916-874-6606.