



1st Quarter 2022

Town of Washington, Vilas County, Wisconsin
Quarterly Room Tax Return
Please Print or Type Clearly!

Permit Number:

Due Date: April 30, 2022

Name:

Address:

Computation of Tax:

1. Gross Receipts for the Period	
2. Non-transient Receipts and Marketplace Provider Receipts	
3. Tax Exempt Receipts (please describe)	
4. Taxable Receipts (Line 1 minus lines 2 & 3)	
5. Tax Due (Line 4 x .045) 4.5% is the tax rate	
6. Interest and Penalties (see Ordinance Chapter 16)	
7. TOTAL DUE (Lines 5 + 6)	

Make Check Payable to the Town of Washington Treasurer

Mail return and Check to: Town of Washington Treasurer
2145 Pinewood Drive
Eagle River, WI 54521

I hereby certify that this return is true and correct and accurately reflects Gross Receipts for Room Tax as defined by Wis. Stats. 77.41 (4) and Town of Washington Ordinance Chapter 16.

Signed:	Date:
Email:	Title:
Telephone:	

Important Notice!

This return and tax is due on or before the last day of the month following the end of the calendar quarter in which the tax was collected. **This return must be filed, even if you have no tax to report.** Failure to either file this return, failure to timely file this return or failure to pay the tax due will result in penalties as specified in Ordinance Chapter 16.



2nd Quarter 2022

Town of Washington, Vilas County, Wisconsin
Quarterly Room Tax Return
Please Print or Type Clearly!

Permit Number:

Due Date: July 31, 2022

Name:

Address:

Computation of Tax:

1. Gross Receipts for the Period	
2. Non-transient Receipts and Marketplace Provider Receipts	
3. Tax Exempt Receipts (please describe)	
4. Taxable Receipts (Line 1 minus lines 2 & 3)	
5. Tax Due (Line 4 x .045) 4.5% is the tax rate	
6. Interest and Penalties (see Ordinance Chapter 16)	
7. TOTAL DUE (Lines 5 + 6)	

Make Check Payable to the Town of Washington Treasurer

Mail return and Check to : Town of Washington Treasurer
2145 Pinewood Drive
Eagle River, WI 54521

I hereby certify that this return is true and correct and accurately reflects Gross Receipts for Room as defined by Wis. Stats. 77.41 (4) and Town of Washington Ordinance Chapter 16.

Signed:	Date:
Email:	Title:
Telephone:	

Important Notice!

This return and tax is due on or before the last day of the month following the end of the calendar quarter in which the tax was collected. **This return must be filed, even if you have no tax to report.** Failure to either file this return, failure to timely file this return or failure to pay the tax due will result in penalties as specified in Ordinance Chapter 16.



3rd Quarter 2022

Town of Washington, Vilas County, Wisconsin
Quarterly Room Tax Return
Please Print or Type Clearly!

Permit Number:

Due Date: October 31, 2022

Name:

Address:

Computation of Tax:

1. Gross Receipts for the Period	
2. Non-transient Receipts and Marketplace Provider Receipts	
3. Tax Exempt Receipts (please describe)	
4. Taxable Receipts (Line 1 minus lines 2 & 3)	
5. Tax Due (Line 4 x .045) 4.5% is the tax rate	
6. Interest and Penalties (see Ordinance Chapter 16)	
7. TOTAL DUE (Lines 5 + 6)	

Make Check Payable to the Town of Washington Treasurer

Mail return and Check to : Town of Washington Treasurer
2145 Pinewood Drive
Eagle River, WI 54521

I hereby certify that this return is true and correct and accurately reflects Gross Receipts for Room as defined by Wis. Stats. 77.41 (4) and Town of Washington ordinance Chapter 16.

Signed:	Date:
Email:	Title:
Telephone:	

Important Notice!

This return and tax is due on or before the last day of the month following the end of the calendar quarter in which the tax was collected. **This return must be filed, even if you have no tax to report.** Failure to either file this return, failure to timely file this return or failure to pay the tax due will result in penalties as specified in Ordinance Chapter 16.



4th Quarter 2022

Town of Washington, Vilas County, Wisconsin
Quarterly Room Tax Return
Please Print or Type Clearly!

Permit Number:

Due Date: January 31, 2023

Name:

Address:

Computation of Tax:

1. Gross Receipts for the Period	
2. Non-transient Receipts and Marketplace Provider Receipts	
3. Tax Exempt Receipts (please describe)	
4. Taxable Receipts (Line 1 minus lines 2 & 3)	
5. Tax Due (Line 4 x .045) 4.5% is the tax rate	
6. Interest and Penalties (see Ordinance Chapter 16)	
7. TOTAL DUE (Lines 5 + 6)	

Make Check Payable to the Town of Washington Treasurer

Mail return and Check to : Town of Washington Treasurer
2145 Pinewood Drive
Eagle River, WI 54521

I hereby certify that this return is true and correct and accurately reflects Gross Receipts for Room as defined by Wis. Stats. 77.41 (4) and Town of Washington Ordinance Chapter 16.

Signed:	Date:
Email:	Title:
Telephone:	

Important Notice!

This return and tax is due on or before the last day of the month following the end of the calendar quarter in which the tax was collected. **This return must be filed, even if you have no tax to report.** Failure to either file this return, failure to timely file this return or failure to pay the tax due will result in penalties as specified in Ordinance Chapter 16.

INSTRUCTIONS FOR THE COMPLETION OF QUARTERLY ROOM TAX RETURNS.

1. GENERAL INSTRUCTIONS: A quarterly return must be filed for each lodging business for **Each Calendar Quarter** of the year...even if you are closed for one or more quarters. Failure to file **any** return required will result in penalties and/or interest charges. **The quarter and the due date for the return have been pre-printed on the upper right portion of the Quarterly Returns.** The permit number, business name and address have been pre-printed on the returns for you as well. **Please be sure to use the correct return for the correct quarter.** All returns should either be typed or printed legibly.

2. LINE BY LINE INSTRUCTIONS:

SECTION A (may already be filled in) requires you to enter your **Accommodations Permit Number**. This can be found on the Accommodations Permit that has been issued to your business. If you have not received a Room Permit, please contact your Town Treasurer. Your Business Name and Address are then to be entered in the spaces provided, in the event they have not already been pre-printed.

SECTION B requires the computation of the Room Tax Due, as follows:

Line 1. Enter your Gross Receipts only from providing lodging to the public. Do not include tax collected in this amount. Also, do not include receipts for anything other than lodging.

Line 2. Enter receipts included in Line 1 that were **Non-Transient Receipts or Marketplace Provider Receipts**. **Non-transient** receipts consist of rentals to the same customer for a continuous period in excess of 30 days. **Marketplace Provider Receipts** are receipts collected on your behalf by a management firm (where taxes are paid on your behalf).

Line 3. Tax Exempt Receipts would be State or Federal Employees traveling on state or federal business. Guidelines require that the bill be in the name of the state or federal agency, that the employee has an authorization letter or other document that indicates they are traveling on state or federal business and that the lodging provider retains a copy of the authorization letter or document. If these guidelines are met, the employee should be exempt from the local accommodations tax as well as the state sales tax. If an entry is made on this line, you must enter a description of the exemption.

Line 4. Subtract Line 2 and 3 from Line 1. These are your **Taxable Receipts** for the period.

Line 5. Multiply Line 3 by .045. This is the amount of the **Room Tax due the Town**.

Line 6. If your return is being filed after the due date, enter the amount of Interest and Penalty due the Town. Interest is figured at the rate of 1% per month or portion of a month from the due date until the tax is paid. The Late Filing Penalty is \$20.00 for the 1st offense and \$50.00 for each offense after that. The interest and penalties are detailed in Ordinance Chapter 16 on our website.

Line 7. Add Lines 5 and 6. This is the total amount of Room Tax and Interest/Penalties, (if any), due the Town.

SECTION C Requires your signature on the line provided. Enter your title, date, email and telephone number in the spaces provided. **Incomplete returns will not be accepted as timely filed returns and will result in penalties and/or interest charges.**

Your Quarterly Room Tax Return is now complete. Remit the amount on Line 7 to the name and address shown at the bottom of the return. If you should have any questions, please contact the Town Treasurer 715-477-2745.