|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **JEFFERSON COUNTY, ALABAMA** | | | | | | | Consumer use tax is an excise tax imposed on the storage, use or consumption of tangible personal within Jefferson County by a business where sale tax was not collected. The tax is accrued by the purchaser and remitted directly to Jefferson County. | | | | |
| **CONSUMER USE TAX RETURN** | | | | | | |
| Required by Act No 405-1967 Regular Session & Act 2015-226 | | | | | | |
|  | | | | | | |
| Name and Address | | | | | | | **You have the option to file this paper return and pay with a check, or you may choose to file and pay your returns electronically using My Alabama Taxes (MAT) website.** [**https://myalabamataxes.alabama.gov**](https://myalabamataxes.alabama.gov)**.**  **Navigate to the local return table and choose Jefferson County (7037) from the locality dropdown.**  **Do not file both paper and electronically**.  Questions can be directed to the Jefferson County Department of Revenue at 205-325-5171. | | | | |
|  | |  | |  | |  | | Account Number | | |
|  | |  | |  | |  | |
|  | | For the month of | | | |  | | FEIN or Social Security Number  \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ | | |
|  | |  | |
|  | | Tax Type | | (A)  Gross Sales & Collections | | (B)  Deductions (From Reverse Side Column E) | | (C)  Net Taxable Sales & Collections | (D)  Tax Rate | (E)  Tax Due |
| (1) | | Automotive Vehicles | |  | |  | |  | 0.0075 |  |
| (2) | | Farm Machinery & Equipment | |  | |  | |  | 0.0075 |  |
| (3) | | Manufacturing & Mining Machinery | |  | |  | |  | 0.0075 |  |
| (4) | | All other sales and receipts | |  | |  | |  | 0.02 |  |
| (5) | | Food/Grocery | |  | |  | |  | 0.02 |  |
|  | This return must be postmarked by the 20th day of the month following the reporting period for which you are filing to be considered a timely return.  By signing this return, I am certifying this return, including any accompanying schedules or statements, has been examined by me and is, to the best of my knowledge and belief, a true and correct return for the period stated. | | | |  | (6) TOTAL GROSS TAX DUE  Total of Column E, Lines 1-5 | | | |  |
| (7) PENALTY – FAILURE TO TIMELY FILE – If filed late, 10% of total tax (Line 6) or $50.00, whichever is greater | | | |  |
| (8) PENALTY – FAILURE TO TIMELY PAY – If paid late, 10% of total tax (Line 6) | | | |  |
|  | | |  |  |  | (9) INTEREST – If filed late, as provided by §40-1-44 | | | |  |
|  | | |  |  |  | (10) AUTHORIZED CREDIT from Department of Revenue. Attach letter from the Department to tax return. | | | |  |
| Please Print Name | | |  | Title |  | (11) **TOTAL AMOUNT DUE AND ENCLOSED** | | | |  |
|  | | |  |  |  | **Make check payable to:**  **SCOTT MOORE, DIRECTOR**  **Mail to:**  **JEFFERSON COUNTY DEPARTMENT OF REVENUE**  **PO BOX 830710**  **BIRMINGHAM, AL 35283-0710** | | | | |
| Signature | | |  | Date |  |
|  | | |  |  | |
| Phone Number | | |  | Email Address | |

STANDARD DEDUCTION SUMMARY TABLE

(The summary below must be completed to correspond with total deductions on front of tax report)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Deductions | Purchases for Qualified Tax Abated Projects and/or Sales Tax Holidays\*  (A) | Adjustment for Unabated Taxes  (B) | Net Allowable Deduction  (C)  Column A \* B | Other Allowable Deductions  (D) | **Total Deductions**  **Column C + D**  **(E)** |
| Tax Rate |
| Automotive Vehicles |  | 50% |  |  |  |
| Farm Machinery & Equipment |  | 50% |  |  |  |
| Manufacturing & Mining Machinery |  | 50% |  |  |  |
| All Other Purchases |  | 50% |  |  |  |
| Food/Grocery |  |  |  |  |  |

**INSTRUCTIONS & INFORMATION CONCERNING THE COMPLETION OF THIS REPORT**

\* To avoid the application of penalty and/or interest amounts, this report must be filed on or before the 20th of the month, following the period for which the report is submitted. The cancellation postmark will determine timely filing.

\* A remittance for the total amount due made payable to the taxing jurisdiction must be submitted with this report.

\* This report should be submitted monthly unless you have requested and been approved for a different filing frequency by this taxing jurisdiction.

\* Any credit for prior overpayment must be approved in advance by the taxing jurisdiction and accompanied by a letter of credit from the taxing jurisdiction.

Business Name:

Physical Address:

Mailing Address:

Phone:

Fax:

Contact Person: