

City of Ilwaco, WA
Quarterly Business & Occupation Tax Report
2nd Quarter - _____ (year)

Business Name: _____ UBI: _____

Phone Number: _____

First Quarter Gross Receipts: \$ _____

Second Quarter Gross Receipts \$ _____

Less City Exemptions for 2nd quarter:

(Please state reason for exemptions)

_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____

Taxable Income for 2nd quarter: \$ _____
(income after exemptions)

Tax Due for 2nd quarter: \$ _____
(taxable income multiplied by .002 is Tax Due)

Certification: I have read this return and certify that the information provided is true and correct.

Date: _____ Signature: _____

Please print your name and title: _____

*Note - Businesses that gross less than \$20,000 in a calendar year are exempt from paying city B&O Tax. Businesses must still report quarterly, even if \$20,000 hasn't been grossed.

Remit to: City of Ilwaco, P.O. Box 548, Ilwaco, WA 98624