

**Return completed form & payment to:**

**City of Kirkland  
Tax Section – Finance & Admin  
123 Fifth Avenue  
Kirkland, WA 98033**

**Cashier Use: FA4222**

**City of Kirkland Account Number:** \_\_\_\_\_  
(Please contact [taxes@kirklandwa.gov](mailto:taxes@kirklandwa.gov) for account number)



**RETURN FOR OCCUPATION TAX – UTILITIES  
SANITARY/GARBAGE COLLECTION SERVICES**

Voice 425.587.3116 \*\* TTY 711 \*\* FAX 425.587.3110 \*\* email: [taxes@kirklandwa.gov](mailto:taxes@kirklandwa.gov)

**For the month of \_\_\_\_\_, 20\_\_**  
*(Returns due by 10<sup>th</sup> of each month following taxable period)*

1. Business Name: \_\_\_\_\_

2. Business Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

3. Business Activity: \_\_\_\_\_

4. Gross income from business activity generated within Kirkland city limits for the taxable period:

A. Residential Domestic Activities..... \$ \_\_\_\_\_

B. Nonresidential Activities ..... \$ \_\_\_\_\_

5. Total amount of exemptions and deductions claimed (see No. 8)..... \$ \_\_\_\_\_

6. Amount of gross income subject to tax (No. 4 minus No. 5):

A. Residential Domestic Activities..... \$ \_\_\_\_\_

B. Nonresidential Activities ..... \$ \_\_\_\_\_

7. Amount of tax due this return:

G. Residential Domestic Activities \$ \_\_\_\_\_ x 9.50% = \$ \_\_\_\_\_

B. Nonresidential Activities: \$ \_\_\_\_\_ x 9.50% = \$ \_\_\_\_\_

Total Tax Due ..... \$ \_\_\_\_\_

Less unused credit claimed on last annual adjusted return ..... \$ \_\_\_\_\_

**Amount of Tax Due** ..... \$ \_\_\_\_\_

*(pay this amount when filing return)*

*(Please complete reverse in full)*

Return for Occupation Tax - Utilities  
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8. Itemization of deductions and exemptions claimed in No. 5 above:
- A. Gross income derived within the City from transactions in interstate commerce ..... \$ \_\_\_\_\_
  - B. Gross income derived within the City from transactions in foreign commerce ..... \$ \_\_\_\_\_
  - C. Gross income derived within the City from business done for the U.S. Government, its officers or agents, and paid by the U.S. Government ..... \$ \_\_\_\_\_
  - D. Total amount paid to the City, the State of Washington, or the United States as excise tax upon the sale or distribution of property or services..... \$ \_\_\_\_\_
  - E. Total amount deducted because of discounts allowed or granted within the City ..... \$ \_\_\_\_\_
  - F. Amount or amounts paid to City as license fee or license fees authorized as deductions by Kirkland Municipal Code Sections 5.08.060(a) and 5.08.0601(c) ..... \$ \_\_\_\_\_
  - G. Total deductions from gross income (Enter here and in No. 5 above) ..... \$ \_\_\_\_\_

**I, the undersigned, declare under penalty of perjury that to the best of my knowledge and belief, the statements herein and on attachments are true, correct, and complete.**

_____	
Signature	Date
_____	
Name and Title (Please Print)	
_____	
Email Address (Preferred Method of Communication)	
_____	
Telephone Number	Fax Number

NOTICE: Contact information provided on this form is part of the public domain. Any correspondence and attachments, including personal information, sent to and from the City of Kirkland are subject to the Washington State Public Records Act, Chapter 42.56 RCW, and may be subject to disclosure to a third party requestor, regardless of any claim of confidentiality or privilege asserted by an external party.