



The Village of YELLOW SPRINGS

Village of Yellow Springs Lodging Tax Return

Please print or type all information:

Hotel or TGL Name:		
Address:		
Name of Owner/Corporation:		
Name of Operator/Manager:		
Filing Period From:		To:
1.	Gross rental receipts (All lodging furnished to guests)	
2.	Exemptions (Room rentals of 30 contiguous days or longer – attach proof)	
3.	Other exemptions (only rooms paid for directly by the federal government or by political subdivisions outside of Ohio qualifying for this exemption – attach proof)	
4.	TOTAL EXEMPTIONS (add lines 2 and 3)	
5.	NET TAXABLE RECEIPTS (Line 1 minus line 4)	
6.	TAX DUE (Enter 3% of line 5)	
7.	Adjustments (from prior period – attach explanation)	
8.	Penalty (10% per month until paid)	
9.	Interest (1.5% per month until paid)	
10.	Renewal Fee (If applicable)	
11.	TOTAL TAX DUE (Sum of lines 6,7,8, & 9)	

I hereby certify that the information and statements contained herein and in any schedules or exhibits attached are true and correct.

Signed: _____

Date: _____

Print Name and Title: _____

Make Payable To:
Village of Yellow Springs

Enclose:
Original signed tax return
Check or Money Order
Any attachments

Return To:
Village of Yellow Springs
ATTN: Finance Director-TGL
100 Dayton Street
Yellow Springs, Ohio 45387