

File one form for each location CTCA 047 (rev. 1/2/2011) Office of Tourism 555 Capitol Mall, Suite 465 Sacramento, CA 95814 Need help? Phone: 916.322.1266 Fax: 916.322.3402 assessment@tourism.ca.gov File Online at tourism.ca.gov

INSTRUCTIONS ON REVERSE				
SECTION I: BUSINESS LOCATION INFORMATION				
TOURISM ID#1	BUSINESS LOCATION NAME (DBA, IF APPLICABLE) ₂		PHONE NUMBER 3	
BUSINESS LOCATION ADDRESS ₄	CITY, STATE, ZIP ₅		FEDERAL TAX ID ₆	
INDUSTRY SEGMENT7	EMAIL ADDRESS 8			
CONTACT NAME9	CONTACT TITLE 10		CONTACT EMAIL ADDRESS 11	
SECTION II: PARENT OR BILLING INFORMATION (ONLY RE	TION II: PARENT OR BILLING INFORMATION (ONLY REQUIRED IF A SEPARATE BILLING ADDRESS IS USED OR A PARENT COMPANY EXISTS)			
TOURISM ID# (IF APPLICABLE)12	BILLING COMPANY NAME (IF APPLICABLE)13		PHONE NUMBER14	
BUSINESS LOCATION ADDRESS ₁₅	CITY, STATE, ZIP ₁₆		FEDERAL TAX ID 17	
SECTION III: OWNERSHIP CHANGE (CHECK ALL THAT APP	PLY)			
CHANGE IN BUSINESS NAME 18	BUSINESS CLOSURE 19		CHANGE IN OWNERSHIP 20	
IF YES, PROVIDE DETAILS (DATES, NEW NAME, NEW OWNER, ETC.)21				
SECTION IV: ASSESSMENT CALCULATION (FINANCIAL IN	FORMATION SHOULD REFLECT THI	E FIGURES FILED ON THE BUS	INESS' ANNUAL TAX RETURN)	
ENTER THE ENDING MONTH AND YEAR FOR THE 12-MONTH PERIOD WHICH YOU ARE REPORTING: 22				
ENTER TOTAL GROSS RECEIPTS FROM ALL CALIFORNIA OPERATIONS FOR THE PERIOD NOTED ABOVE:23				
IF GROSS RECEIPTS ARE LESS THAN \$1 MILLION DOLLARS, CHECK APPROPRIATE BOX IN SECTION V. SIGN, DATE (SECTION VII) AND RETURN FORM. NO ASSESSMENT FEE IS DUE.				
GROSS RECEIPTS FROM ACCOMMODATIONS (HOTEL, MOTEL, ETC.) 24	PERCENTAGE OF TRAVEL ASSESSMENT RATE 26 AND TOURISM 25		ACCOMMODATIONS ASSESSMENT FEE DUE 27	
Ž /	\ \	× 0.00195	= \$	
GROSS RECEIPTS FROM NON-ACCOMMODATIONS	PERCENTAGE OF TRAVEL	ASSESSMENT RATE 30		MMODATIONS
(RESTAURANT, RETAIL, ETC.) ₂₈	AND TOURISM 29	× 0.000975		NT FEE DUE 31
TOTAL ASSESSMENT FEE PASSED TO CUSTOMERS: 32	\$	ADD LINES A + B: 33	\$	
ENTER THE GREATER OF LINES C OR D. THIS IS THE TOTAL ASSESSMENT FEE DUE 34				
SECTION V: DOCUMENTATION OF EXEMPT STATUS (CHECK BELOW IF BUSINESS IS EXEMPT FROM THE TRAVEL AND TOURISM ASSESSMENT)				
THE BUSINESS DERIVES NO CALIFORNIA GROSS RECEIPTS FROM ANY INDUSTRY SEGMENT 35				
THE BUSINESS IS A TRAVEL AGENCY AND/OR TOUR OPERATOR WITH LESS THAN 20% OF REVENUE DERIVED FROM TRAVEL WITHIN CALIFORNIA 36				
THE BUSINESS IS A PUBLIC ENTITY OR AGENCY, I.E. GOVERNMENT ENTITY 37				
THE TOTAL GROSS RECEIPTS ENTERED IN SECTION IV IS LESS THAN \$1,000,000. ACTUAL GROSS RECEIPTS MUST BE ENTERED TO QUALIFY 38				
PERCENTAGE OF TRAVEL AND TOURISM ENTERED IN SECTION IV IS LESS THAN 1%. ACTUAL GROSS RECEIPTS MUST BE ENTERED TO QUALIFY 39				
SECTION VI: OPTIONAL PAYMENT OF MAXIMUM ASSESSMENT				
THE BUSINESS OPTS TO PAY THE MAXIMUM ASSESSMENT OF \$500,000 40				
SECTION VII: CERTIFICATION				
I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.				
SIGN HERE				
AUTHORIZED REPRESENTATIVE SIG	IATURE 41 PRINTED NAME OF AUTHORIZ		ZED REPRESENTATIVE	DATE
Make checks payable to "California Travel And Tourism Commission" Payment to our mailing address: Office of Tourism, 555 Capitol Mall, Suite 465, Sacramento, CA 95814		ddress: (916) 3 pitol Mall, For fur	When no payment is due, the signed form may be faxed to (916) 322-3402 or emailed to assessment@tourism.ca.gov For further assistance, contact the Office of Tourism at assessment@tourism.ca.gov or call (916) 322-1266	

Travel and Tourism Assessment Form Instructions

SECTION I

- 1 The unique identification number assigned to this business location by the Office of Tourism
- 2 The name of the business deriving California Gross Receipts located at the identified street address
- 3 The phone number for the business location
- 4 The street address for the business location
- **5** The city, state and zip code for the business location
- 6 The unique nine-digit Federal Employer Identification Number (FEIN) assigned by the Internal Revenue Service (IRS) for the business location
- 7 The specific segment from which the identified business location earns the greatest portion of its California Gross Receipts
- 8 The generic email address for the business location
- 9 The name of primary contact at business
- **10** The position title of the primary contact at business
- 11 The email address for the primary contact at business

SECTION II

- **12** The unique identification number assigned to a parent/billing company, if applicable
- **13** The name of business acting as the responsible party for the filing and paying of the assessment
- **14** The phone number for billing company
- **15** The mailing address for the business or billing company
- **16** The city, state and zip code for the mailing address of the business or billing company
- **17** The unique nine-digit Federal Employer Identification Number (FEIN) assigned by the Internal Revenue Service (IRS) for the billing company

SECTION III

- **18** Check this box if the business location name has changed or is different than reported on prior assessment filings
- **19** Check this box if the business location has closed prior to or in the past 12 months
- **20** Check this box if the business location was sold prior to or in the past 12 months
- 21 Provide applicable information regarding change such as; closure or sale date, new business name, or new owner information

SECTION IV

22 The ending month and year of the accounting period for the business' most recent income tax return. For example, December 2019 23 California Gross Receipts of this business location for the period reported on line 22. For example, if December 2019 is the ending month and year for the most recently completed tax period, the business will report revenue earned between January 1, 2019 and December 31, 2019. California Gross Receipts means gross receipts minus returns and allowances from sales in California. Examples of California Gross Receipts are the amount shown on line 1c of Schedule F. Form 100 of the California Franchise Tax Board, 1996 revision date, line 3 on Schedule C, Form 1040 of the Internal Revenue Service, 1996 revision date, or for multi-state operations, column (b) on line 3, "total sales" of schedule R-1 of the California Franchise Tax Board, 1996 revision date

If the income tax return for the period reported on line 22 is less than twelve months, annualize the revenue by multiplying the revenue by the number twelve (12) and dividing the result by the number of months on the short period. Thus, a business with \$1,000,000 in California Gross Receipts for six months would multiply that number by 12 and divide by 6, giving an annualized California Gross Receipts of \$2,000,000

- **24** Revenue earned from the accommodations portion of the business (revenues earned in conjunction with an overnight stay)
- 25 Estimated percentage of the California Gross Receipts, from accommodations, that is travel and tourism revenue. "Travel and Tourism Revenue" means California Gross Receipts derived from expenditures to and/or within California by people who (1) travel at least fifty (50) miles from home, one way, for purposes other than commuting to work or school; or (2) have an overnight accommodation as part of the travel, regardless of the distance or purpose traveled. "Home" as used in this definition means the place where the person has resided for the most recent 31 consecutive days
- 26 The current assessment rate for the Accommodations Industry Category is \$1,950 per gross \$1 million or .00195
- **27** The portion of the assessment fee due on revenues identified as accommodations revenue
- **28** Revenue earned from the non-accommodations portion of the business such as restaurant, retail, attraction, recreation, travel and/or transportation service
- 29 Estimated percentage of the California Gross Receipts, from non-accommodations, that is travel and tourism revenue. "Travel and Tourism Revenue" means California Gross Receipts derived from expenditures to and/or within California by people who (1) travel at least fifty (50) miles from home, one way, for purposes other than commuting to work or school; or (2) have an overnight accommodation as part of the travel, regardless of the distance or purpose traveled.
 - "Home" as used in this definition means the

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place where the person has resided for the most recent 31 consecutive days

- **30** The current assessment rate for the Restaurant and Retail, Attraction and Recreation, Travel and Transportation Industry Categories is \$975 per gross \$1 million or .000975
- **31** The portion of the assessment fee due on revenues identified as nonaccommodations revenue
- **32** Any assessed business location can choose to pass some or all of the assessment fee on to customers. The business must report and remit all revenues collected from customers on behalf of the assessment fee
- **33** Add lines A and B to determine assessment fee due from calculation
- **34** The assessment due is the greater of the combined accommodations and non-accommodations assessment fee due OR the total assessment fee passed to customers

SECTION V

- **35** Check this box if the identified business location does not operate as a business type within the Travel and Tourism Industry (Accommodations, Retail and Restaurant, Attraction and Recreation, or Travel and Transportation Service)
- **36** Check this box if you are a tour operator, travel agent, packager or wholesaler that derives less than twenty percent (20%) of its California Gross Revenue from Travel and Tourism Revenue where the travel occurs in California
- **37** Check this box if the business location is a public body
- 38 Check this box if the business earned less than \$1 million within the reported 12-month period. Actual gross receipts must be reported for this exemption to be granted
- **39** Check this box if the reported percentage of travel and tourism is less than one percent for both accommodations and non-accommodations revenues. Actual gross receipts must be reported for this exemption to be granted

SECTION VIZ

40 Check this box to submit a payment of the maximum assessment of \$500,000 for this business location

SECTION VII

41 The Travel and Tourism Form requires a signature, printed name and date of signature by an authorized representative assuring that the foregoing information reported is true and correct. The authorized representative may be contacted for additional information relating to this assessment filing