

Iowa Athletic Commission Events Receipt Report

This report along with your checks payable to the Iowa Department of Revenue and Iowa Athletic Commission must be sent to the Iowa Athletic Commissioner at: Iowa Division of Labor – Athletics, 1000 East Grand Avenue, Des Moines, IA 50319-0209 **within 20 days after the event date.** Questions, contact Pam Conner at 515-725-5602 or pamela.conner@iwd.iowa.gov.

Promoter Business Name	Contact Name	Phone Number	
Email Address	Event Date	Event Location	
Address of Event	City	State	Zip
Promoter License Number for Event		Sales Tax Permit Number	

1. Number of Tickets:	Sold at: \$ _____	Total: \$ _____
Number of Tickets:	Sold at: \$ _____	Total: \$ _____
Number of Tickets:	Sold at: \$ _____	Total: \$ _____
Number of Tickets:	Sold at: \$ _____	Total: \$ _____
Number of Tickets:	Sold at: \$ _____	Total: \$ _____
2. Total Number Tickets Sold: _____		3. Total Gate Receipts: \$ _____
4. Number of Complimentary Tickets Issued: _____	5. Total Value of Complimentary Tickets: \$ _____ <small>Complimentary tickets issued = 5% of the tickets sold. The value of complimentary tickets in excess of 5% of the tickets sold shall be included in the gross admission receipts.</small>	
6. Determine the local option Iowa Sales Tax rate for the jurisdiction the event was held in at: www.idr.iowa.gov/salestaxlookup/ . Divide line #3 by 1.0____. Multiply by .0____. \$ _____		
Make check payable to: Iowa Department of Revenue. Mail check to: Iowa Athletic Commission		
7. Subtract line #6 from line #3: \$ _____ Add line # 5 (if applicable): \$ _____ Total \$ _____	8. 5% Athletic/Admissions Tax Divide line #7 total by 1.05 Multiply by .05: \$ _____ Make check payable to and mail to: Iowa Athletic Commission	

I, _____ have examined this report and state that the facts and
Licensee name
 computations herein are accurate.

State of _____) County of _____)

Tabulated and prepared by: _____

Printed name Signature

This _____ day of _____, 20____.

Revised 08/17/2015