

CITY OF GLENDALE Finance Department

## MONTROSE BUSINESS IMPROVEMENT DISTRICT SPECIAL BUSINESS ASSESSMENT RETURN

2023

See separate instructions for information on completing this return. Please type or print.

Year Ended: December 31, 2023 Due: January 1, 2024 Delinquent If Not Postmarked or Received By: April 1, 2024							
Business Address		MSP#		If the addressee information requires updating, please complete here:			
Business Name State Sales Tax Number:					Federal Employer ID Number:		
Mailing address City ZIP Code							
Check here if this is a <b>new business opened after October 1 of this year.</b> You are only required to pay the minimum							
<ul> <li>Special business assessment in accordance with your business type.</li> <li>Check here if this is a <b>final return</b>. Please file your return <u>within 30 days</u> after the transfer date or closing of your business.</li> </ul>							
Note: Please check the  and complete ALL sections that are applicable to your business.							
	1	Total number of Independent Contractors used in your business			1		
☐Independent Contractors	2	Multiply line 1 by \$250.00	5		2		
contractors	3	Total gross receipts					
Retail and	e i				4		
Service	5 Multiply line 4 by 0.002 6 The minimum assessment						
Businesses Min. \$250.00							
Max.\$5,048.00	7	Add line 2, 5, and 6					
	8	If line 7 is less than \$5,048.00, enter line 7. Otherwise enter \$5,048.00.					
Retail	9	Total gross receipts			9		
Fabricator	10	Subtract \$10,000 from line 9. If less than \$0, enter \$0					
Businesses	11	Multiply line 10 by 0.00075					
Min. \$36.00	12	The minimum assessment					
Max.\$3,156.00	13	Add line 2, 11, and 12					
	14						
Theaters	15	Total number of seats					
Max.\$1,261.00	16	Multiply line 15 by \$1.10					
	17	If line 16 is less than \$1,261.00, enter line 16. Otherwise enter \$1,261.00.					
	18	Total number of employees					
Other	19	Enter the appropriate amount based on line 18: (a) Five employees or less: \$250.00 (b) Six to eight employees: \$756.00 (c) Nine to twelve					
Businesses							
Min. \$250.00 Max.\$5,048.00	employees: \$2,522.00 (d) Thirteen or more employees: \$5,048.00. 0 20 Add line 2 and 19						_
WIAX.\$5,048.00	20 21	If line 20 is less than \$5,048.00, enter line 20. Otherwise enter \$5,048.00.					
	21						
Sub Total	22	(If paid by February 1, skip line 23)			22		
	23	Multiply line 22 by 0.25. This is the		,	23		-
	23	Add line 22 and 23.			24		+
□ Penalty and Interest	25	Multiply line 24 by 0.005					+
(If paid after		Months delinquent: # of days delinquent ÷ 30, rounded to the nearest 1					+
April 1 <sup>st</sup> )	20 27					+	+
1 - /	27					+	+
Total Payment	20	Add line 22 and 28. This is your total penalty and interest. Add line 22 and 28. This is your total payment.				1	+
i otai r ayment		•			29		
<b>C</b> •	I dec	I declare under penalties of perjury pursuant to the laws of the State of California that the				ng is true and correct	t
Sign	Your Signature Date Your Title		Day	Daytime phone number			
Here		-				-	

Make checks payable to CITY OF GLENDALE Mail To: Finance Department /141 N. Glendale Ave., Ste. 346 / Glendale, CA 91206

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