



## Office of County Treasurer of Schoharie County

284 Main Street, P.O. Box 9  
Schoharie, NY 12157

Tel: (518) 295-8386 / Fax: (518) 295-8364

### LODGING FACILITY OCCUPANCY TAX

### QUARTERLY TAX RETURN

FOR THE PERIOD OF DECEMBER 1, 2024 thru FEBRUARY 28, 2025

**DUE DATE: MARCH 20, 2025**

Business Name: \_\_\_\_\_  
Certificate #: \_\_\_\_\_  
Email Address \_\_\_\_\_

#### COMPUTATION OF TAX:

A. Gross Income Collected from occupancy of rooms located in Schoharie County:	\$ _____
B. Subtract: Exempt Income (from exempt organizations and County residents)	-\$ _____
C. Net Taxable Income (Subtotal of Line 'A' minus Line 'B'):	\$ _____
D. 4% County Occupancy Tax Due (Line 'C' multiplied by 0.04):	\$ _____
E. Subtract: Vendor Collection Credit (Line 'D' multiplied by 0.05) (\$200 maximum)	-\$ _____
F. NET OCCUPANCY TAX DUE (Line 'D' minus Line 'E'):	\$ _____
G. Penalty: Add \$50.00 to Line 'F' if postmarked after due date:	\$ _____
H. Prior Period Adjustments (Treasurer's Office Use Only):	\$ _____
I. TOTAL PAYMENT DUE TO "SCHOHAIRE COUNTY TREASURER": (Line 'F' + Line 'G' + Line 'H' = Line 'I')	\$ _____

***This Return MUST be filed even if the amount on Line 'I' is zero***

**\*Per Local Law 1-2023 The Schoharie County Treasurer has the authority to audit any facility\***

Under penalties of perjury, I hereby certify that I have examined this return and the information contained herein, and to the best of my knowledge, this return is true, accurate, correct and complete.

Signed: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Dated: \_\_\_\_\_