



City of Tacoma  
 Tax & License Division  
 747 Market Street, Room 212  
 Tacoma, WA 98402-3773  
 www.cityoftacoma.org

## City of Tacoma Business Activities Questionnaire

To determine the extent of your business activities in the City of Tacoma, please provide the following information. Sign and return the completed statement to the address listed on this questionnaire. Please note that the questions pertain to the entire activity period indicated below. For tax assistance please call (253) 591-5252.

**BUSINESS ACTIVITY TIME PERIOD:** \_\_\_\_\_ to \_\_\_\_\_

### A. Company Identification

Company Name		Phone Number		
Mailing Address		City	State	Zip
Tacoma Contract Account Number	Washington State Reporting Number/UBI	Federal Employer Identification Number/FEIN		

### B. Financial Information

<i>Sales Information</i>				
Gross Service Revenue	Worldwide	\$	City of Tacoma	\$
Gross Wholesaling Revenue	Worldwide	\$	City of Tacoma	\$
Gross Retailing Revenue	Worldwide	\$	City of Tacoma	\$
<i>Expenses and Asset Information</i>				
Payroll	Worldwide	\$	City of Tacoma	\$
Property	Worldwide	\$	City of Tacoma	\$

### C. Company Activities in City of Tacoma

1. Describe in detail your business activities performed in Tacoma, WA and services you provided to Tacoma customers.

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C. Company Activities in City of Tacoma (Continued)

2. Do you sell products (tangible personal property, digital products) to customers in Tacoma, WA?  Yes  No
- a. At retail to consumers or end users? .....  Yes  No
- b. At wholesale for resale? .....  Yes  No
- c. How were your products and services delivered to Tacoma customers? (Mark all that apply)
- Common Carrier  Company Truck  UPS  USPS  Other: \_\_\_\_\_

3. Do/did you deliver goods to Tacoma customers with your own equipment under lease by your firm?
- a. From points outside of Tacoma to points inside Tacoma? .....  Yes  No
- \* If Yes, please provide the origination city and state
- b. From points inside Tacoma to points outside of Tacoma? .....  Yes  No
- c. From points inside Tacoma to points inside Tacoma? .....  Yes  No

4. Sales/Services have been provided to: (mark all that apply)
- Consumers  Retailers or Distributors for Resale
- Washington State, its Counties or Cities  U.S. Government or its Agencies
- City of Tacoma  Institutions (Educational, Religious, Etc)

5. Sales and/or Services are performed by or through: (Mark all that apply)
- Tacoma Resident Employees  Nonresident Employees\*
- Local Independent Agents (Sales Broker)  Nonresident Independent Agents (Sales Broker)\*
- Local Manufacturer's Representatives  Nonresident Manufacturer's Representatives\*
- In-state Trade Shows  Affiliated Companies
- Advertise, flyers, coupons, email, mailings, etc  Affiliate Program
- Corporate Directors/Board Members  Other (describe):
- \* If you checked Nonresident, how many visits per year? For what length of time?

6. Describe the nature of visits into City of Tacoma (i.e., present new and/or existing products to customers, stock shelves, monitor inventories, demonstrate the use of products, install and/or instruct your customers in the use of products and/or equipment). Date of first visit: \_\_\_\_\_ .

7. Do/did you pay Business & Occupation taxes to any other cities in Washington? .....  Yes  No
- \* If Yes, please list the cities:

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C. Company Activities in City of Tacoma (Continued)

8. Has your company or a third party hired by you: (Mark all that apply)

- Performed maintenance and/or repair services in Tacoma?
- Provided training services in Tacoma?
- Erected or installed products in Tacoma?
- Contracted, constructed, or built structures in Tacoma?
- Demonstrated products, attended trade shows, passed out printed promotional materials or electronic equivalent, verbal solicitations, emails, or showcased products and services in Tacoma?
- Entered into agreements with Tacoma residents (businesses or individuals) and paid a commission or other type of payment consideration for referrals?
- Others not listed? (describe below):

9. Has your company warranted its products or services sold to Tacoma customers? .....  Yes  No

a. Was warranty provided by own employees who reside in or travel to Tacoma? .....  Yes  No

b. Was warranty provided by Sub-contractor (e.g. repair shop) in Tacoma? .....  Yes  No

\* If Yes, who is contracted to perform the warranty service in Tacoma?

**D. Employees and Third Party Representatives**

10. Do/did you employ individuals located in Tacoma? .....  Yes  No  
\* If Yes, please provide the number of employees

11. Does your company provide Form 1099 to any Tacoma individual or business entity? .....  Yes  No

12. Has your company received Form 1099 for any activities conducted in Tacoma? .....  Yes  No

13. Does your company have a standard form of written agreement with employees or representatives in Tacoma, or a job description for such persons? .....  Yes  No  
\* If Yes, please enclose a copy (or copies) for our review.

**E. Locations and Property**

14. Do/did your company maintain an office or other facility within City of Tacoma? .....  Yes  No  
\* If Yes:  
    Location(s)  
  
    Number of Employees at location(s)  
    Describe office function(s)

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E. Locations and Property (Continued)

15. Do/did your company maintain an office or other facility outside the City of Tacoma, but within the State of Washington? .....  Yes  No

\* If Yes:  
 Location(s)  
  
 Describe office function(s)

16. Do/did you lease equipment for your own use in Tacoma? .....  Yes  No

\* If Yes, when and where was the property leased?

17. Do/did you have property in Tacoma such as a company car, land, vessels/boats, aircraft, homes, vacation property, computers, servers, etc? .....  Yes  No

\*If Yes, please describe the property in Tacoma:

18. Do/did your company maintain a stock of goods in Tacoma?.....  Yes  No

...\* If Yes; please supply the addresses for all locations:

19. Do/did you rent or lease products (tangible personal property) to customers in Tacoma?.....  Yes  No

a. If Yes, during what years?  
 b. Describe the property rented or leased:

THANK YOU FOR TAKING THE TIME TO COMPLETE THE QUESTIONNAIRE

**Preparer and Signature Information**

Signature	Date
Name (Print)	Position/Title
Direct Phone Number/Extension	Fax Number
Email Address	

E-mail completed questionnaire (PDF) format to: [taxinfo@cityoftacoma.org](mailto:taxinfo@cityoftacoma.org)

OR

Mail completed questionnaire to:  
**City of Tacoma**  
**Tax & License Division**  
**747 Market Street, Room 212**  
**Tacoma, WA 98402**

Contact Us:  
**Tel. No. (253) 591-5252**  
**Fax No. (253) 591-5512**