

City of Pierre

Business Improvement District (BID) #1 Occupation Tax Remittance Form

Due monthly by the 20th of the month following the reporting period.
Complete form and use print button below to print and mail with payment.

Hotel/Motel Name:

Address:

Contact Number:

Contact Name (person completing the form):

Reporting Period: Date Filed:

Number of Rooms Occupied during Reporting Period: _____

LESS Number of Rooms "Comped": _____

LESS Number of "Long Term" Rooms: _____

Total Number of Rooms Subject to Occupancy Tax:

Pierre Occupancy Tax Rate Per Room: _____

\$2.00

Total Payment Due:

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- TAX EXEMPT ORGANIZATIONS. Any rooms that are rented to state, municipal, federal, or other similar tax-exempt organizations are subject to payment of the occupation tax even if they do not have to pay sales tax.
 - COMPED ROOMS. Rooms rented for which no charge is made (comped rooms) are excluded from the occupation tax.
 - LONG TERM STAYS. Rooms rented to any guest for 28 consecutive days or longer are excluded from the occupation tax.
 - SALES TAX. The occupation tax amount is not subject to collection of state or municipal sales tax. Example: Room rate + (room rate X state sales tax rate) + (room rate X municipal sales tax rate) + \$2.00 occupation tax = Total charges per night.
 - REMITTANCE EXAMPLE. If your motel rented 750 rooms during the month, including 10 rooms rented by a tax-exempt organization, 20 comped rooms rented for no charge and 28 consecutive room nights rented to one customer, you would have 702 room rentals subject to the \$2.00 per night occupation tax. Your occupation tax remittance would be \$1,404 payable to the City of Pierre by the 20th day of the following month.
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City of Pierre Finance Officer
222 E Dakota Ave / PO Box 1253
Pierre, SD 57501
Questions? Contact Twila Hight 605-773-3063 or Twila.Hight@ci.pierre.sd.us

I declare, under the penalty of perjury, that the above accounting of rooms rented is accurate, and the tax payment made here is accurate according to my business records.

Signed: _____ Date: _____

Title: _____