



STATE OF NEVADA
DEPARTMENT OF TAXATION
ANNUAL EXHIBITION FACILITY FEE
RETURN

TID# - LOC:
Return for Period Ending:
Due on or Before:
Date Paid:

Business or Individual's Name			
Mailing Address			
City, State, Zip			

Mail Returns to: Nevada Department of Taxation
3850 Arrowhead Drive
Carson City, NV 89706

Check this box if this is an amended return for the specified filing period

Make checks payable to: Nevada Department of Taxation

1.	Annual Fee	
2.	Penalty (see instructions for rate)	
3.	Total Amount Due and Payable (Line 1 + Line 2)	
4.	Total Amount Remitted with Return	

I HEREBY CERTIFY THAT THIS RETURN INCLUDING ANY ACCOMPANYING SCHEDULE AND STATEMENTS HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN.

RETURN MUST BE SIGNED

SIGNATURE OF TAXPAYER OR AUTHORIZED AGENT

TITLE _____ PHONE NUMBER (WITH AREA CODE) _____

FEDERAL TAX ID NUMBER (EIN OR SSN) _____ DATE _____

EXHIBITION FACILITY FEE INSTRUCTIONS ANNUAL FILING

A person or governmental entity that operates a facility at which one or more exhibitions are held is responsible for the payment of a licensing fee on behalf of the persons who do not have a State Business License but who take part in the exhibition for a purpose related to the conduct of a business.

“Exhibition” to mean a trade show or convention, craft show, sporting event or any other similar event involving the exhibition of property, products, goods, services, or athletic or physical skill.

DUE DATE: Per NRS 360.787 (2)(a) On an annual basis by remitting to the Department the sum of \$5,000 on or before July 1st for all the exhibitions held at that facility during the fiscal year beginning on that day.

CALCULATION OF AMOUNT DUE:

Line 1: On an annual basis, you must remit to the Department the sum of \$5,000 on or before July 1, for all exhibitions to be held at the facility during that fiscal year beginning on that day.

Line 2: If this return is not submitted/postmarked and the fees are not paid on or before the due date as shown on the face of this return, the amount of penalty due is based on the number of days the payment is late per NAC 360.395 (see table below). The maximum penalty amount is 10%.

Number of Days Late	Penalty Percentage	Multiple By:
1 – 10	2%	.02
11 – 15	4%	.04
16 – 20	6%	.06
21 – 30	8%	.08
31 +	10%	.10

Determine the number of days late the payment is, and multiply the total fees owed (Line1) by the appropriate rate based on the table above. The result is the amount of penalty that should be entered. Example: the fees due January 31, but not paid until February 15. The number of days late is 15 so the penalty is 4%.

Line 3: Add Line 1 and Line 2 and enter the results.

Line 4: Enter the amount remitted with return.

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If your location wants to file Quarterly, please use the EXC-F049 Quarterly EFF Return. If you have questions concerning this return, please call the Department of Taxation at 775-684-2000.