

# Occupational Tax and Registration Return for Wagering

OMB No. 1545-0236

Return for period from \_\_\_\_\_, \_\_\_\_\_ to June 30, \_\_\_\_\_  
 (Month and day) (Year) (Year)

|                       |                                       |                                |
|-----------------------|---------------------------------------|--------------------------------|
| <b>Type or print.</b> | Name                                  | Employer identification number |
|                       | Number, street, and room or suite no. |                                |
|                       | City, state, and ZIP code             |                                |

**Check one:**     First return                       Renewal return  
 Supplemental registration (**Do not** complete lines 1, 2, 4, 5, and 6.)

Daytime telephone number  
(    )

Business address (if different from your home address or address entered above)

| For IRS Use Only |   |
|------------------|---|
| T \$ .....       | 1 |
| FF .....         | 2 |
| FP .....         | 3 |
| I .....          | 4 |
| T \$ .....       | 5 |

Alias, style, or trade name, if any

**Part I Occupational Tax**

1 Enter the date (month and day) you will start accepting wagers during the tax period . . . . .

2 Tax (see instructions) . . . . . \$

See **Form 11-C, Payment Voucher**, for how to make your payments.

3 **Check one:**     Principal                       Agent accepting wagers for another (see instructions)

**Part II Additional Information (for principal only)**

4 If taxpayer is a firm, partnership, or corporation, give true name of members or officers.

| True name | Title | Home address | Social security number |
|-----------|-------|--------------|------------------------|
| .....     | ..... | .....        | .....                  |

5 Are you or will you be engaged in the business of accepting wagers on your own account? . . . . .  Yes  No  
 If "Yes," complete **a, b,** and **c.**

**a** Name and address where each business is or will be conducted:

| Name of location | Address (number and street) | City, state, and ZIP code |
|------------------|-----------------------------|---------------------------|
| .....            | .....                       | .....                     |

**b** Number of agents engaged in receiving wagers on your behalf ▶ .....

**c** True name, address, and employer identification number of each agent:

| True name | Address | Employer identification number |
|-----------|---------|--------------------------------|
| .....     | .....   | .....                          |

**Part III Additional Information (for agents accepting wagers on behalf of others)**

6 If you receive or will be receiving wagers on behalf of or as an agent for some other person or persons, give true name, address, and employer identification number of each person.

| True name | Address | Employer identification number |
|-----------|---------|--------------------------------|
| .....     | .....   | .....                          |

**Part IV Supplemental Registration (see instructions)**

7 Explain why you are filing a supplemental registration. Include the date of the event. ....

**Sign Here**

Under penalties of perjury, I declare that I have examined this return and/or registration (including any accompanying statements or lists), and, to the best of my knowledge and belief, it is true, correct, and complete.

|           |      |       |
|-----------|------|-------|
| Signature | Date | Title |
|-----------|------|-------|

# General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

## What's New?

**New Form 11-C(V), Payment Voucher**, must be included with your return and payment. If you usually receive Form 11-C from the IRS, there should be a preaddressed Form 11-C and a voucher page with a preaddressed voucher. If you order Form 11-C from the IRS or download it from the IRS website, a voucher is included with Form 11-C.

**Purpose of form.** Form 11-C is used to register certain information with the IRS and to pay the occupational tax on wagering.

**Who must file.** File Form 11-C if you are a principal or an agent.

1. A principal is a person who is in the business of accepting taxable wagers for his or her own account.

2. An agent is a person who accepts taxable wagers on the principal's behalf.

Taxable wagers include those placed:

- On a sports event or contest with a person engaged in the business of accepting wagers on a sports event or contest.
- In a wagering pool on a sports event or contest if the pool is conducted for profit.
- In a lottery conducted for profit (other than a state-conducted lottery). The term lottery includes the numbers game, policy, punch boards, and similar types of wagering.

**What is not taxed.** The tax is **not** imposed on the following five items:

- A parimutuel wagering enterprise, including horse racing, dog racing, and jai alai, when licensed under the laws of the state in which accepted.
- Coin-operated devices, such as pinball machines.
- Sweepstakes, wagering pools, or lotteries that are conducted by an agency of a state, if the wager is placed with the state agency or its authorized agents or employees.
- Games of the type in which usually all persons placing wagers in the game are present when wagers are placed, winners are determined, and prizes or other property are distributed.
- Drawings conducted by an organization exempt from tax under sections 501 or 521, as long as the net proceeds of the drawing do not inure to the benefit of a private shareholder or individual.

**When to file.** File the first return before wagers are accepted. After that, file a renewal return by July 1 for each year wagers are accepted. A first return is also due in certain situations in which there has been a change in ownership or control. The return must be filed within 30 days after new members are admitted to a firm or partnership; a corporation is formed to continue the business of a partnership; or a stockholder continues the business of a dissolved corporation.

**Employer Identification Number (EIN).** Enter your EIN. If you do not have an EIN, use **Form SS-4**, Application for Employer Identification Number, to apply for one. You can get this form at Social Security Administration offices or by calling

**1-800-TAX-FORM** (1-800-829-3676). You can also complete the SS-4 online application at [www.irs.gov](http://www.irs.gov).

**Address.** If you are an individual, enter your home address.

**Signature.** Form 11-C must be signed by a person who has authority to sign for the taxpayer.

**Where to file.** Mail Form 11-C, your check or money order, and the payment voucher to:

**Internal Revenue Service Center  
Cincinnati, OH 45999-0101**

Mail the return using the U.S. Postal Service or other designated private delivery service. See the instructions for your income tax return for more information.

**Penalties.** There are penalties for not filing on time, for accepting wagers before paying the tax, and for willfully failing to file the return. There are also penalties for making or helping to make false returns, documents, or statements.

**Confidentiality of information.** No Treasury Department employee may disclose information you supply in relation to wagering tax except when needed to administer or enforce the tax law. See section 4424 for more information.

## Specific Instructions

**Return period.** Enter the month, day, and year that begins the return period. Also, enter the ending year. Write the year as a 4-digit number, i.e., 2003, 2004, etc.

**Line 1.** Enter the day and month that you will start accepting wagers. A full month's tax is due regardless of which day you start accepting wagers during a month.

**Line 2.** There are two amounts of tax, \$500 and \$50, payable for the year that begins July 1. The \$50 tax applies only if all wagers (including those accepted by an agent for another) are authorized under the laws of the state in which accepted. If you start accepting wagers after July 31, the tax is prorated for the first year. Use the table below to determine the tax.

**Note:** *This tax is paid once for each taxable period. If you are required to file a supplemental registration, do not pay the tax a second time.*

| If you start accepting wagers in | \$500 tax | \$50 tax |
|----------------------------------|-----------|----------|
| July . . . .                     | \$500.00  | \$50.00  |
| August . . .                     | 458.33    | 45.83    |
| September .                      | 416.66    | 41.66    |
| October . . .                    | 375.00    | 37.50    |
| November . .                     | 333.33    | 33.33    |
| December . .                     | 291.66    | 29.16    |
| January . . .                    | 250.00    | 25.00    |
| February . . .                   | 208.33    | 20.83    |
| March . . . .                    | 166.66    | 16.66    |
| April . . . .                    | 125.00    | 12.50    |
| May . . . . .                    | 83.33     | 8.33     |
| June . . . . .                   | 41.66     | 4.16     |

**Payment voucher.** Complete **Form 11-C(V)**, Payment Voucher, and file it with Form 11-C and your payment.

**Line 3.** You must check one of the boxes. See **Who must file** for the definition of principal and agent. Principals are liable for the excise tax on wagers, which is reported and filed monthly on **Form 730**, Monthly Tax Return for Wagers.

**Lines 4 and 5.** These lines are to be completed by principals only. Enter applicable information for officers and/or partners of the company on line 4. Enter on line 5a the name and address of each location where business will be conducted. Enter the number of agents who accept wagers for you on line 5b and their names, addresses, and EINs on line 5c.

**Line 6.** This line is to be completed by agents accepting wagers on behalf of another. Enter the name, address, and EIN of each person or company on whose behalf you accept wagers.

## Supplemental Registration

**Line 7.** A supplemental registration must be filed by **principals** within 30 days (except see **Agents** below) when any of the following events occur.

1. You change your business or home address.
2. You continue for the remainder of the period, as the surviving spouse or child, executor, administrator, or other legal representative, the business of a deceased person who paid the occupational tax.
3. You continue for the remainder of the period the business as a receiver or trustee in bankruptcy.
4. You continue for the remainder of the period the business as an assignee for creditors.
5. One or more members withdraws from a firm or partnership.
6. The corporate name is changed.
7. You engage a new agent to receive wagers. You must file a supplemental registration to report the name, address, and EIN of each new agent within 10 days after you engage the agent.

**Agents** must complete line 7 if you have previously filed Form 11-C and are engaged to receive wagers for another. You must register the name, address, and EIN of each new person who engaged you within 10 days after being engaged.

**How to file a supplemental registration.** Complete the name, address, EIN, business address, and alias lines. Also, be sure to check the "supplemental registration" box. Then check the applicable box on line 3 and enter the information that has changed on line 7, including the date of the event of change. Do not complete lines 1, 2, 4, 5, or 6 for a supplemental registration.

# Form 11-C Payment Voucher

## Purpose of Form

Complete Form 11-C(V) and file it with **Form 11-C**, Occupational Tax and Registration Return for Wagering. We will use the completed voucher to credit your payment more promptly and accurately, and to improve our service to you.

If you have your return prepared by a third party, provide this payment voucher to the return preparer.

## Specific Instructions

**Box 1—Employer identification number (EIN).** If you do not have an EIN, apply for one on **Form SS-4**, Application for Employer Identification Number, and write "Applied For" and the date you applied in this entry space.

**Box 2—Amount paid.** Enter the amount paid with Form 11-C.

**Box 3.** Enter the same year and month you entered on the "Return for period from" line at the top of Form 11-C. For example, if your return is for the full period that begins July 1, 2004, enter 200407.

**Box 4—Name and address.** Enter your name and address as shown on Form 11-C.

- Enclose your check or money order made payable to the "United States Treasury." Be sure to enter your EIN, "Form 11-C," and the tax period on your check or money order. Do not send cash. Do not staple this voucher or your payment to Form 11-C (or to each other).

- Detach the completed voucher and send it with your payment and Form 11-C. See **Where to file** on page 2.

▼ Detach Here and Mail With Your Payment and Form 11-C. ▼

Form **11-C(V)**

(October 2003)

Department of the Treasury  
Internal Revenue Service

## Payment Voucher

OMB No. 1545-0235

▶ Do not staple or attach this voucher to your payment or Form 11-C.

|  |   |         |       |   |   |   |  |  |  |  |  |  |  |  |  |
|--|---|---------|-------|---|---|---|--|--|--|--|--|--|--|--|--|
| <p><b>1</b> Enter your employer identification number.</p> <p style="text-align: center;">⋮</p>  | <p><b>2</b> Enter the amount of your payment. ▶</p> | Dollars | Cents |   |   |   |  |  |  |  |  |  |  |  |  |
| <p><b>3</b> Enter year and month as shown on Form 11-C.</p> <table style="width: 100%; text-align: center;"> <tr> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>M</td><td>M</td> </tr> <tr> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> <td style="border: 1px solid black; height: 20px;"></td> </tr> </table> | Y   | Y       | Y     | Y | M | M |  |  |  |  |  |  | <p><b>4</b> Enter your business name (individual name if sole proprietor).</p> <p>Enter your address.</p> <p>Enter your city, state, and ZIP code.</p> |  |  |
| Y  | Y   | Y       | Y     | M | M |   |  |  |  |  |  |  |  |  |  |
|  |   |         |       |   |   |   |  |  |  |  |  |  |  |  |  |
| <p>Send Form 11-C, this voucher, and payment to:<br/><b>Internal Revenue Service</b><br/>Cincinnati, OH 45999-0101</p>   |   |         |       |   |   |   |  |  |  |  |  |  |  |  |  |

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on Form 11-C to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax. Section 4411 imposes a special tax on each person who is engaged in receiving wagers for or on behalf of any person liable for the tax on wagers. Section 4412 requires that person to register with the IRS. Form 11-C is used to determine the amount of the tax that you owe and to register certain information with the IRS. Section 6109 requires you to provide your employer identification number. Routine uses of this information include giving

it to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia for use in administering their tax laws. If you fail to provide this information in a timely manner, you may be subject to penalties and interest.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is: **Recordkeeping**, 7 hr. 24 min.; **Learning about the law or the form**, 57 min.; **Preparing the form**, 2 hr., 3 min.; and **Copying, assembling, and sending the form to the IRS**, 16 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Tax Products Coordinating Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-0001. **Do not** send the form to this address. Instead, see **Where to file** on page 2.

