

Massachusetts State Lottery Commission
Charitable Gaming Division
P.O. Box 859012
Braintree, Massachusetts 02185-9012
TEL. (617)849-5555
FAX: (617)849-5546

RAFFLE AND/OR BAZAAR TAX RETURN

ATTENTION:

**FILE RETURN AND PAYMENT
 WITHIN 10 DAYS AFTER OCCASION
 TO ABOVE ADDRESS
 (SEE PENALTIES PAGE 2- PAR. A. THROUGH E.)**

CHECK (✓)

TYPE OF ACTIVITY: RAFFLE BAZAAR OTHER (SPECIFY) _____

PLEASE TYPE OR PRINT IN INK

SCHEDULE 1

NAME OF ORGANIZATION																			

STREET ADDRESS OR ORGANIZATION														

AREA CODE & TELEPHONE NO.							

CITY OR TOWN														

F.ID.NO. OF ORGANIZATION							

COMPUTATION OF TAX:

1. RECEIPTS FROM SALES

_____ X _____ \$
No. of Tickets or Chances Sold Cost per Ticket or Chance

ZIP CODE				

DATE OF OCCASION							

2. OTHER RECEIPTS

\$ _____

3. GROSS RECEIPTS (ADD LINES 1 AND 2)

\$ _____

4. TAX \$ _____ X .05
Amount of Line 3

\$ _____

5. PENALTY AND INTEREST (SEE PAR D. - PAGE 2)

\$ _____

6. TOTAL TAX DUE (ADD LINES 4 AND 5)

\$ _____

SCHEDULE 2

COMPUTATION OF NET PROFIT OR LOSS:

1. GROSS RECEIPTS (FROM LINE 3 - SCHEDULE 1)

\$ _____

2. LESS EXPENSES:

A. TOTAL PRIZES AWARDED (CASH OR VALUE)

\$ _____

B. OTHER EXPENSES

\$ _____

C. TAX PAID (LINE 6 - SCHEDULE 1)

\$ _____

D. TOTAL EXPENSES (ADD ITEMS 2A-B-C)

\$ _____

3. NET PROFIT OR (LOSS) (SUBTRACT LINE 2D FROM LINE 1)

\$ _____

STAPLE CHECK > < STAPLE CHECK
 MAKE CHECK PAYABLE TO:
 MASSACHUSETTS STATE LOTTERY COMMISSION

IMPORTANT!!! - PLEASE READ THE FOLLOWING PARAGRAPHS

