



STATE OF NEVADA
DEPARTMENT OF TAXATION

MAIN OFFICE
3850 Arrowhead Dr., 2nd Floor
Carson City, Nevada 89706

JOE LOMBARDO
Governor

GEORGE KELESIS
Chair, Nevada Tax Commission

SHELLIE HUGHES
Executive Director

January 10, 2025

Letter ID: L0000167624

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WILD SHEEP FOUNDATION
720 ALLEN AVE
CODY WY 82414-3402

Account: SUT-0000-3618-7472
Case: 0-000-025-157

One-Time Sales Tax Return

This document with payment of any taxes owed is to be returned to the Promoter at the conclusion of the event. Tax returns should be filed and paid on My Nevada Tax at MyNVTax.nv.gov/TAP.

Promoter Instructions and Responsibilities:

- Prior to the event, distribute this One-Time Sales Tax Return to each vendor who has declared they will be selling tangible personal property at the event. Only vendors selling tangible products need the form.
- **You are responsible** for gathering and reconciling the one-time returns and taxes owed from the event to be reported on your next REV-F013 Sales Tax Return. If any vendor has their own Sales Tax account, they should report their sales and taxes owed from the event on their REV-F013 Sales Tax Return.

Vendor Instructions and Responsibilities:

- Complete this document after the event is over and return it, along with payment for any taxes owed, to the Promoter.
- **NOTE:** If you have your own Seller's Permit and will be reporting the taxes from the event on your account, please indicate this by checking the box below and entering your Account Number in the space provided.

Visit us online!

Visit tax.nv.gov to learn more about Nevada tax laws, Department of Taxation policies and procedures including your Taxpayer Bill of Rights, and location information for all our offices.

Sincerely,

The Nevada Department of Taxation

☐ Check this box if you have your own Sales Tax Account with the Department of Taxation.

Enter your SUT Account # here: **SUT:** ____ - ____ - ____

Name of Event: SHEEP SHOW County of Event: WASHOE

Promoter Account ID: SUT-0000-3618-7472

Event Date(s): 01/16/2025 - 01/18/2025

Location of Event: 4590 S VIRGINIA ST RENO NV 89502-6013

Name of Business or Individual: _____

Phone No. (____) _____ FEIN/SSN: _____

Business Address:

City, State: Zip:

Gross Taxable Sales: _____ Tax Rate: 8.265%

Sales Tax Due: _____

Signature: _____ Assigned Space No. : _____
(Owner/Partner/Corporate Officer)

Pursuant to NRS 372.055, every vendor who makes sales more than twice in a twelve (12) month period must register as a seller in the State of Nevada.