

Department of Planning & Sustainability Division of Business Licensing 178 Sams Street, Decatur, GA 30030

(404) 371-2461

ALCOHOLIC BEVERAGE BY THE DRINK EXCISE TAX REPORTING FORM

Business Mailing Address:		Business Name:	
Business Physical Address:		Business Number: Excise Number: Year Reported: Month Reported:	
ALL SECTIONS OF THIS F	ORM MUST BE FULL	Y COMPLETED AND THE FORM FILED EVEN THOUGH NO T	AX MAY BE DUE.
A. Inventory - Liquor reporting only		B. Excise Tax Reporting	
List your inventory purchases f Licensed Wholesalers for this n			
1. Atlanta Whls.	Liters	1. Gross Liquor Sales	\$
2. Empire Distr.	Liters	2. Tax - 3% times Line 1	\$
3. General Whsle	Liters	 Less Ontime Payment Discount - Subtract of line 2 (Only on Timely Returns) 	\$
4. Georgia Crown	Liters	4. Credit or Debit	\$
5. National Distr.	Liters	5. Penalty- 10% times Line 2 - 25% fraud or intent to evade	\$
6. United Distr.	Liters	6. Interest - 1% per month or portion of a month times Line 2	\$
7	Liters	7. Total Amount Due	\$
8. Total Liters Purchased		8. Unpaid Fees	\$
		9. Total Amount Paid	\$
This return and payment of the late payment penalty and inte		ing the month shown above are due by the 20th day of the	next month to avoid a
I hereby certify that the staten my knowledge.	nents made herein ar	nd on any supporting documents are true, correct, and con	nplete to the best on
Print Name of Preparer		Signature of Preparer Da	ate
PLEASE MAKE A COPY FOR YOU Note: Incomplete forms will be		THE ORIGINAL WITH YOUR PAYMENTS. be fully completed.	
		ow up to 5 days for fees to post to account for Online paym	nent)
		loud.infor.com/IPSProdDP/Views/AgencyLogin.aspx or	Scan Below
Make check payable to: DeKal	h County Revenue ar	nd License	

Division of Business Licensing PO Box 100020

Decatur, GA 30031-7020

Mail Check and Form to: Department of Planning & Sustainability

