



3120 Stonecrest Boulevard, Suite 100
 Stonecrest, GA 30038
 770.224.0200
www.stonecrestga.gov

BEER WHOLESALE EXCISE TAX RETURN

BUSINESS NUMBER: _____ MONTH OF: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____ CITY ISSUING LICENSE: _____

Each wholesaler selling malt beverages to dealers selling malt beverages within the City of Stonecrest, must collect a specific tax in the amount of \$0.05 per 12 ounces, or proportionate part thereof as to graduate said amount of tax on smaller containers, and an excise tax on draft beer of \$6.00 per container of not more than 15 1/2 gallon size, or proportionate part thereof within a bulk container commonly used for tap or draft beer sold by each wholesale dealer within the City of Stonecrest. This tax is due and payable to the City of Stonecrest monthly on or before the 15th day of the month following the month the tax was collected. Failure to pay by the due date will subject the licensee to the penalty and interest on the tax due. Remittance shall be accompanied by a statement under oath from a responsible person employed by the wholesaler showing the total sales of each type of malt beverage, by volume and price, disclosing for the preceding calendar month the exact quantities of malt beverages, by size and type of container, constituting a beginning and ending inventory for the month, sold to every person holding a retail license for the sale of malt beverages in the City of Stonecrest. Returns remitted by mail must be postmarked by the 15th of the month due. For example, the tax collected for the month of January is due and payable on or before February 15th.

COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5	COLUMN 6
Size of Container	Beginning Inventory	Ending Inventory	Total Sold	Tax Per Container	Tax Due:
7 oz.				\$0.0292	
8 oz.				\$0.0333	
12 oz.				\$0.0500	
14 oz.				\$0.0583	
16 oz.				\$0.0667	
32 oz.				\$0.133	
½ Barrel (15 1/2 gal.)				\$6.00	
1 Barrel (31 gal.)				\$12.00	

This return is subject to audit:

1. Multiply columns 4 and 5 to determine tax due amount payable (column 6) \$ _____
2. Penalty (add 5% of line 1 for each month or fraction thereof, not to exceed 25% if submitted after the 15th of the month) + \$ _____
3. Total Amount Due \$ _____

I DECLARE UNDER PENALTIES PRESCRIBED THAT THE INFORMATION PROVIDED IN THIS RETURN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Printed Name: _____ Date: _____

Signed: _____ Title: _____

Contact Phone: _____ Fax: _____

PLEASE MAKE A COPY FOR YOUR FILE AND RETURN THE ORIGINAL WITH YOUR PAYMENT *Note: Incomplete forms will be returned to you to be fully completed*



BEER WHOLESALE EXCISE TAX RETURN

BUSINESS NAME: _____ MONTH OF: _____

DISTRIBUTOR CONTACT: _____ DISTRIBUTOR FEIN#: _____ Date: _____

Distributors Name	Address	Phone	Email	Beer	Wine	Liquor
				Y/N	Y/N	Y/N
				Y/N	Y/N	Y/N
				Y/N	Y/N	Y/N
				Y/N	Y/N	Y/N
				Y/N	Y/N	Y/N
				Y/N	Y/N	Y/N

Please return this remittance form with payment payable to:

Note: all Payments due by 20th day monthly before
added fees of 10% Penalty & 1% Interest per month late

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