

B-C-775 Spirituos Liquor/Antique Spirituous Liquor Tax Return

Return for Month Ended (MM-DD-YY) <u> </u> - <u> </u> - <u> </u>	DOR Use Only <u> </u> / <u> </u> / <u> </u>
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Name of County, Municipal ABC Board, or Distillery (First 35 Characters) (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)

Street Address

City _____ State _____ Zip Code _____

Name of Contact Person _____ State of Domicile _____

Phone Number _____ Fax Number _____

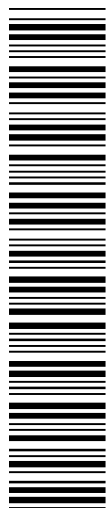
FEIN or SSN

NCDOR ID/Account Number

Fill in circle if applicable:

☐ Amended Return

Computation of Tax on Spirituous Liquor/Antique Spirituous Liquor Sales and Mixed Beverages Surcharge

1. Total Retail Sales of Spirituous Liquor/Antique Spirituous Liquor 2. a. 1¢ or 5¢ bottle charge b. Additional 1¢ or 5¢ bottle charge c. \$20 on each four liters of Spirituous Liquor/Antique Spirituous Liquor sold to a mixed beverage permittee for resale in mixed beverages and to a guest room cabinet permittee for resale d. Bailment Surcharge 3. Net Sales of Spirituous Liquor/Antique Spirituous Liquor Including the 30% State Excise Tax and the 3 1/2% add-on for Local Boards (Line 1 minus Lines 2a through 2d) 4. Taxable Sales of Spirituous Liquor/Antique Spirituous Liquor Excluding the 30% State Excise Tax and the 3 1/2% add-on for Local Boards (Line 3 divided by 133.5%) 5. State Excise Tax Due Multiply Line 4 by 30% 6. State's Share of Mixed Beverages Surcharge Multiply Line 2c by 50% 7. Tax Due Add Lines 5 and 6 8. Penalty (10% for late payment; 5% per month, maximum 25%, for late filing) Multiply Line 7 by rate above if return with full payment is not filed timely. 9. Interest (See the Department's website, www.dornc.com, for current interest rate.) Multiply Line 7 by applicable rate if return with full payment is not filed timely. 10. Total Payment Due Add Lines 7 through 9		▶ 1. _____ .00 ▶ 2a. _____ .00 ▶ 2b. _____ .00 ▶ 2c. _____ .00 ▶ 2d. _____ .00 ▶ 3. _____ .00 ▶ 4. _____ .00 ▶ 5. _____ .00 ▶ 6. _____ .00 ▶ 7. _____ .00 ▶ 8. _____ .00 ▶ 9. _____ .00 ▶ 10. \$ _____ .00
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Signature: _____ Title: _____ Date: _____
 I certify that, to the best of my knowledge, this return is accurate and complete.

For your convenience, electronic payment methods are available through our website at www.dornc.com.

Returns are due on or before the 15th day of the month following the month in which the tax was collected. Your check or money order must be in the form of U.S. currency from a domestic bank.