

Place QR Code Here Human Readable text here

GENERAL EXCISE/USE ANNUAL RETURN & RECONCILIATION

X Place an X in this box ONLY if this is an AMENDED return

TAX YEAR ENDING 99-99-99 HAWAII TAX I.D. NO. GE-999-999-9999-99

Last 4 digits of your FEIN or SSN 1234

ID NO XX

NAME: TAXPAYER NAMEXXXXXXXXXXXXXXXXXXXX

Table with 4 columns: BUSINESS ACTIVITIES, Column a (VALUES, GROSS PROCEEDS OR GROSS INCOME), Column b (EXEMPTIONS/DEDUCTIONS), Column c (TAXABLE INCOME). Rows include Wholesaling, Manufacturing, Producing, Wholesale Services, Landed Value of Imports for Resale, Business Activities of Disabled Persons, and Sum of Part I, Column c.

• ATTACH CHECK OR MONEY ORDER HERE •

DECLARATION - I declare, under the penalties set forth in section 231-36, HRS, that this return (including any accompanying schedules or statements) has been examined by me and, to the best of my knowledge and belief, is a true, correct, and complete return, made in good faith for the tax period stated, pursuant to the General Excise and Use Tax Laws, and the rules issued thereunder.

IN THE CASE OF A CORPORATION OR PARTNERSHIP, THIS RETURN MUST BE SIGNED BY AN OFFICER, PARTNER OR MEMBER, OR DULY AUTHORIZED AGENT.

SIGNATURE TITLE DATE DAYTIME PHONE NUMBER

Name: TAXPAYER NAMEXXXXXXXXXXXXXXXXXXXX

Place QR Code Here

ID NO XX

Hawaii Tax I.D. No. GE-999-999-9999-99

(mm dd yy)

Human Readable text here Last 4 digits of your FEIN or SSN 1234

TAX YEAR ENDING 99-99-99

Table with 4 columns: BUSINESS ACTIVITIES, Column a (VALUES, GROSS PROCEEDS OR GROSS INCOME), Column b (EXEMPTIONS/DEDUCTIONS), Column c (TAXABLE INCOME). Row 18: Insurance Commissions.

PART IV - COUNTY SURCHARGE — Enter the amounts from Part II, line 17, Column c attributable to each county. Multiply Column c by the applicable county rate(s) and enter the total of the result(s) on Part VI, line 27, Column e.

Table with 4 columns: Description, Column a, Column b, Column c. Rows 19-22: Oahu, Maui, Hawaii, Kauai.

PART V — SCHEDULE OF ASSIGNMENT OF TAXES BY DISTRICT (ALL taxpayers MUST complete this Part and may be subject to a 10% penalty for noncompliance.)

Place an X in the box of the taxation district in which you have conducted business. IF you did business in MORE THAN ONE district, place an X in the box for "MULTI" and attach Form G-75.

Table with 4 columns: District, Description, Column a, Column b. Row 23: Oahu, Maui, Hawaii, Kauai, MULTI.

PART VI - TOTAL RETURN AND RECONCILIATION

Main reconciliation table with 4 columns: Description, TAXABLE INCOME (Column c), TAX RATE (Column d), TOTAL TAX (Column e = Column c X Column d). Rows 24-39: Various tax calculations and totals.