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0U13AA 1.000

GENERAL EXCISE/USE TAX RETURN

* GBT081 8 1 *

SIGNATURE

	Month	Quarter	Semiannual					
F	ERIOD ENDING	(MM/YY)		NAME:				
HAWAII TAX I.D. NO. W					Last 4 digits of your FEIN or SSN			
	BUSINESS .CTIVITIES		Column a s,GROSSPROCEEDS GROSSINCOME	Column b EXEMPTIONS/DEDUCTIONS (Attach Schedule GE)	Column c TAXABLE INCOME (Column a minus Column b			
ΑI	TI-GENERAL	EXCISE and	USE TAXES @ 1/2 O	F 1% (.005)				
1.	Wholesaling							
2.	Manufacturing							
3.	Producing							
4.	Wholesale Services							
5.	Use Tax on Imports For Resale							
6.	Business Activities of Disabled Persons	of						
7. P A I	Sum of Part I, Column	c (Taxable Income	e) - Enter the result here and USE TAXES @ 4% (on Page 2, line 21 Column (a) (.04)				
8.	Sum of Part I, Column T II - GENERAL Retailing Services Including	c (Taxable Income EXCISE and	e) - Enter the result here and USE TAXES @ 4% (on Page 2, line 21 Column (a) (.04)				
8.	Retailing	c (Taxable Income EXCISE and	e) - Enter the result here and USE TAXES @ 4% (on Page 2, line 21 Column (a) (.04)				
8. 9.	Retailing Services Including	c (Taxable Income EXCISE and	e) - Enter the result here and USE TAXES @ 4% (on Page 2, line 21 Column (a) (.04)				
8. 9. 10	Retailing Services Including Professional		e) - Enter the result here and USE TAXES @ 4% (on Page 2, line 21 Column (a) (.04)				
8. 9. 10.	Retailing Services Including Professional Contracting Theater, Amusemen		e) - Enter the result here and USE TAXES @ 4% (on Page 2, line 21 Column (a) (.04)				
8. 9. 10. 11.	Retailing Services Including Professional Contracting Theater, Amusemen and Broadcasting		e) - Enter the result here and USE TAXES @ 4% (on Page 2, line 21 Column (a) (.04)				
8. 9. 10. 11.	Retailing Services Including Professional Contracting Theater, Amusemen and Broadcasting Commissions Transient		e) - Enter the result here and USE TAXES @ 4% (on Page 2, line 21 Column (a) (.04)				
8. 9. 10. 11.	Retailing Services Including Professional Contracting Theater, Amusemen and Broadcasting Commissions Transient Accommodations Rentals		e) - Enter the result here and USE TAXES @ 4% (on Page 2, line 21 Column (a) (.04)				
8. 9. 10. 11. 12. 13. 14.	Retailing Services Including Professional Contracting Theater, Amusement and Broadcasting Commissions Transient Accommodations Rentals Other Rentals Interest and		e) - Enter the result here and USE TAXES @ 4% (on Page 2, line 21 Column (a) (.04)				

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 $In \, {\sf CASE\,OF\,A\,CORPORATION\,OR\,PARTNERSHIP, THIS\,RETURN\,MUST\,BE\,SIGNED\,BY\,AN\,OFFICER, PARTNER\,OR\,MEMBER, OR\,DULY\,AUTHORIZED\,AGENT.}$

DATE

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GBT082*

Name: Hawaii Tax I.D. No. W Last 4 digits of your FEIN or SSN

Period Ending

BUSINESS ACTIVITIES

Column aVALUES, GROSS PROCEEDS
OR GROSS INCOME

PART III - INSURANCE COMMISSIONS @ .15% (.0015)

Column b EXEMPTIONS/DEDUCTIONS (Attach Schedule GE)

Column c TAXABLE INCOME (Column a minus Column b)

18. Insurance Commis	•					
				E	Enter this amount on line 23, C	Column (a)
PART IV -	CITY & COUNTY	OF HONOLULU SI	JRCHARGE TAX @	1/2 OF 1% (.005)		
19. Oahu Sı	urcharge					
					Inter this amount on line 24, C	Column (a)
					ST complete this Part and so for the taxation district	
	conducted business				an X in the box for "MUL	
20.	Oahu	Maui	Hawaii	Kauai	MULTI	

PART VI - TOTAL PERIODIC RETURN	TAXABLE INCOME Column (a)	TAX RAT Column (TOTAL TAX Column (c)=Column (a) (Column (b)
21. Enter the amount from Part I, line 7	.00	x .005	=	\$
22. Enter the amount from Part II, line 17	.00	x .04	=	
23. Enter the amount from Part III, line 18, Column c $f m^-$.00	x .0015	=	
24. Enter the amount from Part IV, line 19, Column c $f m$ \equiv	.00	x .005	=	\$
25. TOTAL TAXES DUE. Add column (c) of lines 21 throu	ugh 24 and enter result here. If you			
did not have any activity for the year, enter "0.00" here	1	2 5.		
26. Amounts Assessed on Periodic Returns.	IALTY \$			
(For Amended Return ONLY) INTE	EREST \$	26.		
27. TOTAL AMOUNT. Add lines 25 and 26.		n 27.		
28. TOTAL PAYMENTS MADE FOR THE PERIOD (For Amended	d Return ONLY)	n ₂₈		
. TOTALL ATMENTONIABLE OR THE LARGE (FOR MINORIAGE	arretam orver)			
29. CREDIT TO BE REFUNDED. Line 28 minus line 27 (For Ar	mended Return ONLY)	N 29		
80. ADDITIONAL TAXES DUE. Line 27 minus line 28 (For Ame	ended Return ONLY)	N 30.		
21 FORLAIFFILINGONLY WI	IALTY \$	31.		
INTERPOLATION IN	EREST \$	JI		
Amended Returns, add lines 30 and 31)		1 32.		
· =				
S PLEASE ENLER THE AINCULING COP TOUR PAYINE				
83. PLEASE ENTER THE AMOUNT OF YOUR PAYMEI to "HAWAII STATE TAX COLLECTOR" in U.S. dollars to Form G-45.	. Write "GE", the filing period, and your Haw	all		
to "HAWAII STATE TAX COLLECTOR" in U.S. dollars to Form G-45. Tax I.D. No. on your check or money order. Mail to: HAWAII DE	PARTMENT OF TAXATION, P.O. BOX 142			
to "HAWAII STATE TAX COLLECTOR" in U.S. dollars to Form G-45. Tax I.D. No. on your check or money order. Mail to: HAWAII DE HONOLULU, HI 96806-1425 or file and pay electronically at www.	PARTMENT OF TAXATION, P.O. BOX 142 ehawaii.gov/efile			
to "HAWAII STATE TAX COLLECTOR" in U.S. dollars to Form G-45. Tax I.D. No. on your check or money order. Mail to: HAWAII DE HONOLULU, HI 96806-1425 or file and pay electronically at www. If you are NOT submitting a payment with this return, pl	PARTMENT OF TAXATION, P.O. BOX 142 ehawaii.gov/efile lease enter "0.00" here.			
to "HAWAII STATE TAX COLLECTOR" in U.S. dollars to Form G-45. Tax I.D. No. on your check or money order. Mail to: HAWAII DE HONOLULU, HI 96806-1425 or file and pay electronically at www.	PARTMENT OF TAXATION, P.O. BOX 142 ehawaii.gov/efile lease enter "0.00" here.			