CANNABIS BUSINESS TAX RETURN



(City Municipal Code Chapter 3.08)

CITY OF GOLETA Finance Department 130 Cremona Drive, Suite B • Goleta, CA 93117

businesslicense@cityofgoleta.org CITY OF GOLETA INFORMATION CANNABIS TAX CERTIFICATE NUMBER CANNABIS BUSINESS LICENSE NUMBER REPORTING PERIOD (Due by the 30th day following the quarter end) 1c ☐ JAN-MAR ☐ APR-JUN ☐ JUL-SEPT □ OCT-DEC YEAR: 1d BUSINESS INFORMATION **CONTACT PERSON & TITLE COMPANY NAME** 2b 2a **ADDRESS** PHONE 2c 2d CITY STATE ZIP E-MAII 2e 2f 2g 2h COMPUTATION OF CANNABIS BUSINESS TAX **GROSS RECIEPTS** TAX RATE CANNABIS BUSINESS CLASSIFICATION TAX (PER CATEGORY) Adult Use (Non-Medicinal) Cannabis Retail/Delivery 5% \$ 0% \$ Medicinal-Use Cannabis Retailing/Delivery \$ Manufacturing 2% \$ \$ Cultivation \$ 4% \$ Distribution/Transport Only \$ 1% \$ \$ 0% \$ Testing Nurseries (State Cultivation License Type 4) \$ 1% \$ *Microbusinesses must use highest tax rate applicable to their activities unless they can demonstrate Subtotal \$ portions of activities)* Total Cannabis Business Tax Due 3d Penalties Penalty: If tax is paid after due date, check this b_{3b} \Box 25% \$ Additional Penalty: If tax is paid more than 30 days 25% \$ after due date. ALSO check this box: 3с Total Penalties Due \$ Total **Total Tax & Penalties Due** \$ Information provided on this tax report is confidential and will only be provided to government agencies for official use or in accordance with the law. This report is to be signed by the person required to pay the gross receipts tax or by a managing officer or agent, with the legal authority to bind the cannabis operation. I declare under penalty of perjury that I am authorized to make and file the foregoing statement, and that to the best of my knowledge and belief it is a true, correct and complete statement made in good faith for the period stated PRINT NAME **SIGNATURE** DATE

4a FOR OFFICE USE ONLY POST MARKED 30TH DAY AFTER QUARTER END: YES / NO INITIALS:

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CANNABIS BUSINESS TAX RETURN INSTRUCTIONS

- 1a) "Cannabis Tax Certificate Number": Enter the specific Tax Certificate Number issued to the business by the City of Goleta during the initial tax certificate application process.
- 1b) "Cannabis Business License Number": Enter the specific Business License Number issued to the business by the City of Goleta during the initial application process.
- 1c) "Reporting Period": Select the box (ONLY ONE) for the quarter being reported. Use one form per quarter.
- 1d) "Year": Enter the appropriate calendar year for the quarter being reported.
- 2a) "Company Name": Enter the Company Name that matches the Tax Certificate and Business License applications. If the business name has changed, immediately contact businesslicense@CityofGoleta.org
- 2b) "Contact Person & Title": Enter the name of the person who is authorized to fill out the form and who is able to receive communication from the Finance Dept.
- 2c) "Address": Enter the address where primary operations occur. This should match the City of Goleta's Business License and Tax Certificate records. If the business address has changed, immediately contact businesslicense@CityofGoleta.org
- 2d) "Phone": Please use a reliable phone number, preferably the direct information for the individual listed as the "Contact Person".
- 2e) "City": Enter the city address where primary operations occur. This should match the City of Goleta's Business License and Tax Certificate records. If the business address has changed, immediately contact businesslicense@CityofGoleta.org
- 2f) "State": Enter the state where primary operations occur. This should match the City of Goleta's Business License and Tax Certificate records. If the business address has changed, immediately contact businesslicense@CityofGoleta.org
- 2g) "Zip": Enter the zip code where primary operations occur. This should match the City of Goleta's Business License and Tax Certificate records. If the business address has changed, immediately contact businesslicense@CityofGoleta.org
- 2h) "Email": Please use a reliable email address, preferably the direct information for the "Contact Person". This email address should be able to receive communication from the Finance Dept.
- 3a) "Gross Receipts": Based on the City of Goleta's City Municipal Code Chapter 3.08 definitions for each Cannabis Business Classification, enter the Gross Receipts for the quarter being reported on each respective form. Use one form per quarter. See City Municipal Code Chapter 3.08 for a full description of each classification.
- 3b) "Penalties" (Checkbox): If tax is being paid after the due date, please check this box.
- 3c) "Additional Penalties" (Checkbox): If tax is being paid MORE THAN 30 DAYS after the due date, please check this box, in addition to checking the previous box above.
- 3d) Calculations: This Excel file is designed to autocalculate the tax, penalties, and total amount due.
- 4a) Name/Title/Signature/Date: Please read the disclosure above the Name/Title/Signature/Date section prior to submitting the form.