DO NOT WRITE IN THIS AREA

16

ID NO 01

(REV. 2023)

FORM G-49

GENERAL EXCISE/USE ANNUAL RETURN & RECONCILIATION

G49_F 2023A 01 VID01

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

TAX YEAR ENDING

HAWAII TAX I.D. NO. GE

Last 4 digits of your FEIN or SSN

NAME:

ATTACH CHECK OR MONEY ORDER HERE

Column a Column b Column c EXEMPTIONS/DEDUCTIONS BUSINESS VALUES, GROSS PROCEEDS TAXABLE INCOME OR GROSS INCOME (Attach Schedule GE) ACTIVITIES (Column a minus Column b) PART I - GENERAL EXCISE and USE TAXES @ 1/2 OF 1% (.005) 1. Wholesaling 1 2. Manufacturing 2 3. Producing 3 Wholesale Services 4 5. Landed Value of Imports for Resale 5 6. Business Activities of **Disabled Persons** 6 7. Sum of Part I, Column c (Taxable Income) — Enter the result here and on page 2, line 24, Column c 7 PART II - GENERAL EXCISE and USE TAXES @ 4% (.04) 8. Retailing 8 9. Services Including Professional q 10. Contracting 10 11. Theater, Amusement and Broadcasting 11 12. Commissions 12 13. Transient Accommodations Rentals 13 14. Other Rentals 14 15. Interest and All Others 15 16. Landed Value of Imports for Consumption 16 17 17. Sum of Part II, Column c (Taxable Income) — Enter the result here and on page 2, line 25, Column c

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

Continued on page 2 — Parts V & VI MUST be completed



FORM G-49 Page 2 of 2 (REV. 2023) Name: ID NO 01 回流回 Hawaii Tax I.D. No. (mm dd yy) Last 4 digits of your FEIN or SSN TAX YEAR ENDING G49 F 2023A 02 VID01 Column a Column b Column c VALUES, GROSS PROCEEDS EXEMPTIONS/DEDUCTIONS BUSINESS TAXABLE INCOME OR GROSS INCOME ACTIVITIES (Attach Schedule GE) (Column a minus Column b) PART III - INSURANCE COMMISSIONS @ .15% (.0015) Enter this amount on line 26, Column c 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. 19. Oahu (rate = .005) 20. Maui (rate = .005) 21. Hawaii (rate = .005) 22. Kauai (rate = .005) 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. 23 Oahu Maui Hawaii Kauai MULTI PART VI - TOTAL RETURN AND RECONCILIATION TAXABLE INCOME TAX RATE TOTAL TAX Column d Column e = Column c X Column d Column c Enter the amount from Part I, line 7 24 x.005 24. 25 Enter the amount from Part II, line 17 x .04 25. Enter the amount from Part III line 18, Column c..... x.0015 26. 26 27. COUNTY SURCHARGE TAX. See Instructions for Part IV. Multi district complete Form G-75....27. TOTAL TAXES DUE. Add column e of lines 24 through 27 and enter result here (but not less than zero). 28 PENALTY \$ Amounts Assessed During the Period..... 29. 29. INTEREST \$ 30

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35.

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