Washington State
Liquor Control Board

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WASH WINE IMPORTERS SUMMARY TAX REPORT
FORM LIQ-776
(Revised 02/12)

License Number	
License Name	
Location Address	
City, State & Zip	

REPORT IN LITERS

MONTH	
YEAR	

If Revised Report (check box) ☐

PART 1: PURCHASES REPORT

Parts 1 and 2 are Non-Taxable

	CIDER LITERS	NON-FORTIFIED LITERS	FORTIFIED LITERS	TOTAL LITERS
(1)				

PART 2: ONE LINE PER DISTRIBUTOR FOR REPORTING MONTH

(1) DISTRIBUTOR'S WSLCB LICENSE NO.	(2) SOLD TO DISTRIBUTOR NAME	CITY	(3) CIDER LITERS	(4) NON-FORTIFIED LITERS	(5) FORTIFIED LITERS	(6) TOTAL LITERS
		TOTALS FOR PART 2 (7)				

PART 3: IMPORTERS REPORT OF ALL SAMPLES PROVIDED (does not include those shipped to Distributors where Distributor pays tax)

Taxes are owed on Samples only

Certified True and Correct Under Penalty of Perjury

Signature of Person Completing Form	
Printed Name	
Date	
Telephone No	
E-Mail Address	

	CIDER IN LITERS	NON-FORTIFIED IN LITERS	FORTIFIED IN LITERS	TOTAL IN LITERS
	(8)	(9)	(10)	(11)
	Box (8) X $0.0814 = (12)	Box (9) X $0.2292 = (13)	Box (10) X $0.4536 = (14)	Total Tax Due
	(12)	(13)	(14)	(15)
PENALTIES for late reporting 2% per month of box (15)				(16)
Prior Refund or Balance Due				(17)
TOTAL After Adjustments				(18)

WSLCB USE ONLY	
Payee Number	
Amount $	

WSLCB USE ONLY	
Amount Received $	
Postmark	

Instructions for Completing LIQ-776 WASH WINE IMPORTERS SUMMARY TAX REPORT

Monthly report must be filed every month INCLUDING MONTHS WHEN THERE IS NO ACTIVITY. Reports must be postmarked on or before the 20th of the month following receipt of the wine. When the 20th falls on a Saturday, Sunday, or a legal holiday, the filing must be postmarked by the U.S. Postal Service no later than the next postal business day. The first Washington Wine Distributor to receive wine is liable for the taxes.

Licensee Number: Your Liquor Control Board Licensee Number.
Licensee Name: Trade name per license number entered
Location Address: Location address per license number entered
City, State, Zip: City, State, and Zip Code per license number entered
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MONTH: Enter reporting month.
YEAR: Enter reporting year.

Complete the numbered fields as follows: Numbers below correspond to numbers on form. **(Round two decimal places).**

Part 1 (1)	Enter the total amount purchased for Cider, Non-Fortified and Fortified wine.

Part 2	Use only one line per distributor TOTAL for the reporting month. Current WSLCB Licensee Lists are available at the LCB website: http://www.liq.wa.gov/taxreporting/main
(1)	Enter the Liquor Control Board licensee number of Distributor.
(2)	Enter name of the WA Distributor and shipping location by city.
(3)	Enter the Total Liters of Cider sold for the reporting month. Use only one line per distributor
(4)	Enter the Total Liters of Non-Fortified wine sold for the reporting month. Use only one line per distributor.
(5)	Enter the Total Liters of Fortified wine sold for the reporting month. Use only one line per distributor.
(6)	Total the Liters sold for reporting month per Distributor.
(7)	Enter the Total Liters in part 2, columns 3, 4, 5, and 6.

Part 3	**IMPORTERS REPORT OF ALL SAMPLES PROVIDED (does not include those shipped to WA Distributors where the Distributor pays the tax).**
(8)	Enter the Total Liter samples of Cider for the reporting month.
(9)	Enter the Total Liter samples of Non-Fortified wine for the reporting month.
(10)	Enter the Total Liter samples of Fortified wine for the reporting month.
	Calculating Taxes, Penalties, and any Adjustments.
(12)	Calculate line 8 multiplied by $0.0814 (Cider tax rate per liter).
(13)	Calculate line 9 multiplied by $0.2292 (Non-Fortified tax rate per liter).
(14)	Calculate line 10 multiplied by $0.4536 (Fortified tax rate per liter).
(15)	Calculate Total Tax Due.
(16)	Enter the amount of Penalties (Reports are due the 20th of the following month and penalties accumulate at 2% of tax due every month after the due date).
(17)	Enter the amount of any prior month credit or balance due. Show credit as a negative number, balance due as a positive number.
(18)	Enter the total sum of boxes 16 and 17. Amount of payment to be submitted with report.

Certified True and Correct Under Penalty of Perjury	
	Signature of Person Completing Form:
	Enter printed Name of person who completed the form
	Enter the date form completed
	Enter the telephone number of person who completed the form
	Enter the e-mail address of person who completed the form.