# MEALS TAX - Tax Year

PLEASE RETURN COMPLETED REPORT WITH PAYMENT TO:
Commissioner of the Revenue
P.O. Box 2964
Charlottesville, VA 22902-2964

<table>
<thead>
<tr>
<th>LICENSE NUMBER</th>
<th>________________</th>
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<tbody>
<tr>
<td>MONTH ENDED</td>
<td>________________</td>
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<tr>
<td>LEGAL NAME</td>
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<td>TRADE NAME</td>
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<td>LOCATION ADDRESS</td>
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## 1. GROSS RECEIPTS (month)______________________________ $______________________________

## 2. ALLOWABLE DEDUCTIONS

- a. Meals to employees, when no charge is made to employee $______________________________
- b. Meals paid for by federal, state, or local governments $______________________________
- c. Meals or food sold from coin operated vending machines $______________________________
- d. Other (please state)______________________________ $______________________________
- e. Total Deductions (sum of items a, b, c and d)…………………………………$______________________________

## 3. LINE 1 LESS LINE 2 E______________________________________________________________ $______________________________

## 4. TAX (6% OF LINE 3) Starting 7/1/19__________________________________________________ $______________________________

## 5. SELLER’S DISCOUNT (3% OF LINE 4)__________________________________________________ $______________________________
allowable ONLY when return and payments are filed on time

## 6. TOTAL TAX LESS SELLER’S DISCOUNT (LINE 4 LESS LINE 5)………………………………$______________________________

## 7. PENALTY FOR LATE PAYMENT (5% OF TAX, LINE 4, OR MINIMUM OF $2.00)………………$______________________________

## 8. INTEREST (10%)______________________________________________________________ $______________________________

## 9. TOTAL (SUM OF LINES 6, 7, AND 8)________________________________________________ $______________________________

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TO AVOID PENALTY AND INTEREST, REPORT WITH PAYMENT MUST BE FILED ON OR BEFORE THE 20TH DAY OF THE MONTH FOLLOWING THE TAX MONTH.

MAKE CHECK PAYABLE TO: CITY TREASURER, CHARLOTTESVILLE, VIRGINIA

I declare that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Signature:________________________________ Date:______________________________

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FOR OFFICE USE ONLY

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<td>PROCESSOR</td>
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Revised 4/09/19