DR 8404 (03/26/24)
COLORADO DEPARTMENT OF REVENUE
Liquor Enforcement Division
PO BOX 17087
Denver CO 80217-0087
(303) 205-2300

Colorado Liquor Retail License Application

* Note that the Division will no	t accept cash	Paid by Check	Date Uploaded t	o Movelt
		Paid Online		
New License ■ New-Concu	ırrent 🔲 Trans	fer of Ownership	State Property C	Only Master file
 All answers must be printed Applicant must check the ap Applicant should obtain a co 	opropriate box	(es)	Code: SBG.Co	olorado.gov/Liquor
Applicant is applying as a/an	Individual Corporation	and Wife Partnersh	es Limited Liabilit lips)	
Applicant Name If an LLC, name of LLC; WOODS SUPERMARKET INC.	ir partnersnip, at lea	st 2 partner's names; if co	rporation, name of	corporation
FEIN Number			Otata Cal	TN
T ETH Number			State Sale	es Tax Number
Trade Name of Establishment (DBA)			Pusiness	Talanhana
WOODS SUPERMARKET				Telephone
Address of Premises (specify exact location	on of promises inclu	ode evite/voit event eve	970-541-9	9080
4320 LEDGE ROCK DR.	on or premises, inclu	ide suite/unit numbers)		
City	County			Otata ZID Cada
JOHNSTOWN	County			State ZIP Code
Mailing Address (Number and Street)		City on Town		CO 80534 State ZIP Code
703 EAST COLLEGE P.O. BOX 880		City or Town		
Email Address		BOLIVAR		MO 65611
dshultz@woodssupermarket.com				
If the premises currently has a liquesent Trade Name of Establishment (nse, you must answ	er the following	g questions.
Present State License Number	Present Class of	f License	Present Expiration	on Date

Section A Nonrefundable application fees*

	Application Fee for New License	\$1,100.00
1	Application Fee for New License with Concurrent Review	\$1,200.00
	Application Fee for Transfer	\$1,100.00
	Section B Liquor License Fees*	
	Add Optional Premises to H & R	
	Add Sidewalk Service Area	\$75.00
	Arts License (City)	\$308.75
	Arts License (County)	\$308.75
	Beer and Wine License (City)	\$351.25
	Beer and Wine License (County)	\$436.25
	Brew Pub License (City)	\$750.00
	Brew Pub License (County)	\$750.00
	Campus Liquor Complex (City)	\$500.00
	Campus Liquor Complex (County)	\$500.00
	Campus Liquor Complex (State)	\$500.00
	Club License (City)	\$308.75
	Club License (County)	\$308.75
	Distillery Pub License (City)	\$750.00
	Distillery Pub License (County)	\$750.00
	Hotel and Restaurant License (City)	\$500.00
	Hotel and Restaurant License (County)	\$500.00
	Hotel and Restaurant License with one optional premises (City)	\$600.00
	Hotel and Restaurant License with one optional premises (County)	\$600.00

Section B Liquor License Fees* (Continued)

Liquor-Licensed Drugstore (City)\$227.5	50
Liquor-Licensed Drugstore (County)\$312.5	50
Lodging & Entertainment - L&E (City)\$500.0)0
Lodging & Entertainment - L&E (County)\$500.0)0
Manager Registration - H & R\$30.0	00
Manager Registration - Tavern\$30.0	00
Manager Registration - Lodging & Entertainment	00
Manager Registration - Campus Liquor Complex	00
Optional Premises License (City)\$500.0	0
Optional Premises License (County)\$500.0	0
Racetrack License (City)\$500.0	0
Racetrack License (County)\$500.0	0
Resort Complex License (City)\$500.0	0
Resort Complex License (County)\$500.0	0
Related Facility - Campus Liquor Complex (City)\$160.0	0
Related Facility - Campus Liquor Complex (County)\$160.0	0
Related Facility - Campus Liquor Complex (State)\$160.0	0
Related Facility - Campus Liquor Complex (State)	
	0
Retail Gaming Tavern License (City)\$500.0	0
Retail Gaming Tavern License (City)\$500.0 Retail Gaming Tavern License (County)\$500.0	0 0 0

Section B Liquor L	icense Fees" (Continued)
Retail Liquor Store (County)	\$312.50
Tavern License (City)	\$500.00
Tavern License (County)	\$500.00
Vintners Restaurant License (City)	\$750.00
Vintners Restaurant License (County)	\$750.00
Questions? Visit: SBG.Colora	do.gov/Liquor for more information
Do not write in this space - Fo	or Department of Revenue use only
Liability	y Information
License Account Number	Liability Date
License Issued Through (Expiration Date)	Total

Application Documents Checklist and Worksheet

Instructions: This checklist should be utilized to assist applicants with filing all required documents for licensure. All documents must be properly signed and correspond with the name of the applicant exactly. All documents must be typed or legibly printed. Upon final State approval the license will be mailed to the local licensing authority. Application fees are nonrefundable. Questions? Visit: SBG.Colorado.gov/Liquor for more information

Items submitted, please check all appropriate boxes completed or documents submitted

I.	App	plicant information
		Applicant/Licensee identified
	100	State sales tax license number listed or applied for at time of application
		License type or other transaction identified
		Return originals to local authority (additional items may be required by the local licensing authority)
		All sections of the application need to be completed
		Master file applicants must include the Application for Master File form DR 8415 and applicable fees to this Retail License Application
II.	Diag	gram of the premises
		No larger than 81/2" X 11"
		Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.)
		Separate diagram for each floor (if multiple levels)
		Return originals to local authority (additional items may be required by the local licensing authority)
		Kitchen - identified if Hotel and Restaurant
		Bold/Outlined Licensed Premises
II.	Proc	of of property possession (One Year Needed)
		Deed in name of the applicant (or) (matching Applicant Name provided on page 1) date stamped / filed with County Clerk
		Lease in the name of the applicant (or) (matching Applicant Name provided on page 1)
		Lease assignment in the name of the applicant with proper consent from the landlord and acceptance by the applicant
		Other agreement if not deed or lease. (matching Applicant Name provided on page 1)

IV.	Background information (DR 8404-I) and financial documents
	Complete DR 8404-I for each principal (individuals with more than 10% ownership, officers, directors, partners, members)
	Fingerprints taken and submitted to the appropriate Local Licensing Authority through an approved State Vendor. Master File applicants submit results to the State Do not complete fingerprint cards prior to submitting your application. The Vendors are as follows: IdentoGO Appointment Scheduling Website: https://www.colorado.gov/pacific/cbi/identification-faqs State Liquor Code for IdentoGO: 25YQHT Colorado Fingerprinting Appointment Scheduling Website: http://www.coloradofingerprinting.com/cabs/ Phone: 720-292-2722 833-224-2227 (toll free) State Liquor Code for Colorado Fingerprinting: C030LIQI
	Purchase agreement, stock transfer agreement, and/or authorization to transfer license
	List of all notes and loans (Copies to also be attached)
V.	Sole proprietor/husband and wife partnership (if applicable)
	Form DR 4679 Lawful Presence Affidavit
	Copy of State issued Driver's License or Colorado Identification Card for each applicant
VI.	Corporate applicant information (if applicable)
	■ Certificate of Incorporation
	■ Certificate of Good Standing
	■ Certificate of Authorization if foreign corporation (out of state applicants only)
VII.	Partnership applicant information (if applicable)
	Partnership Agreement (general or limited).
	Certificate of Good Standing
VIII.	Limited Liability Company applicant information (if applicable)
	☐ Copy of articles of organization √ ↓ ↓
	Certificate of Good Standing
	Copy of Operating Agreement (if applicable)
	Certificate of Authority if foreign LLC (out of state applicants only)
IX.	Manager registration for Hotel and Restaurant, Tavern, Lodging & Entertainment, and Campus Liquor Complex licenses when included with this application
	\$30.00 fee
	\square If owner is managing, no fee required

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managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers under the age of twenty-one years?	0	Yes	•	No
2. Has the applicant (including any of the partners if a partnership; members or mailiability company; or officers, stockholders or directors if a corporation) or manage Colorado or any other state):	_			ited
a. Been denied an alcohol beverage license?	. 0	Yes	•	No
b. Had an alcohol beverage license suspended or revoked?	. 0	Yes	•	No
c. Had interest in another entity that had an alcohol beverage license suspended or revoked?	. 0	Yes	•	No
If you answered yes to a, b or c above, explain in detail on a separate sheet.				
3. Has a liquor license application (same license class), that was located within 500 feet of the proposed premises, been denied within the preceding two years?	0	Yes	•	No
If "yes", explain in detail.				
Are the premises to be licensed within 500 feet, of any public or private school that meets compulsory education requirements of Colorado law, or the principal campus of any college, university or seminary?		Yes or	•	No
Waiver by local ordinance?	O	165	O	INO
Other				
5. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of greater than (>) 10,0000? NOTE: The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS	0	Yes	•	No

6. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 3000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of less than (<) 10,0000? NOTE: The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS.	_	Yes	•	No
For additional Retail Liquor Store only.				
a. Was your Retail Liquor Store License issued on or before January 1, 2016?	. 0	Yes	•	No
b. Are you a Colorado resident?	. 0	Yes	•	No
7. Has a liquor or beer license ever been issued to the applicant (including any of the partners, if a partnership; members or manager if a Limited Liability Company; or officers, stockholders or directors if a corporation)? If yes, identify the name of the business and list any current financial interest in said business including any loans to or from a licensee.	@	Yes	O.	No
8. Does the applicant, as listed on line 2 of this application, have legal possession of the premises by ownership, lease or other arrangement?	•	Yes	0	No
O Ownership Lease O Other (Explain in detail)				
a. If leased, list name of landlord and tenant, and date of expiration, exactly a the lease:	s the	у ар	pear c	on
Landlord Tenant	Ехрі	ires		
CARSON DEVELOPMENT WOODS SUPERMARKET	204	5		
b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question on page 9	0	Yes	I	No
c. Attach a diagram that designates the area to be licensed in black bold outlin dimensions) which shows the bars, brewery, walls, partitions, entrances, exi room shall be utilized for in this business. This diagram should be no larger	ts ar	nd wh	nat ea	

Question #7 DR8404 Woods Supermarket.

Woods Supermarket currently holds Liquor licenses in the state of Missouri.

Ten grocery store licenses including sampling licenses.

Two convenience store locations.

The Managing Officer for all locations is Daniel Shultz V.P. of Merchandising for Woods Supermarkets inc.

business; or who will receive mone	y from this business? A	attach a separate sheet if necessary.
Last Name	First	Name
Alu		
Date of Birth (MM/DD/YY)	FEIN or SSN Number	Interest/Percentage
Last Name	First I	Name
Date of Birth (MM/DD/YY)	FEIN or SSN Number	Interest/Percentage
Last Name	First N	Name
Date of Birth (MM/DD/YY)	FEIN or SSN Number	Interest/Percentage
	3820 00 8 9	
	-	nd any written agreement or details
		g partnerships, corporations, limited ss proceeds of this establishment, and
		ngent or conditional in any way by
volume, profit, sales, giving of ad		
10. Optional Premises or Hotel and R Has a local ordinance or resolution		
Number of additional Optional Premise	areas requested. (See	elicense fee chart)
For the addition of a Sidewalk Servi	ce Area per Regulatio	on 47-302(A)(4), include a diagram of the
		poverning body authorizing use of the
	de but is not limited to	a statement of use, permit, easement, or
other legal permissions.		
11. Liquor Licensed Drugstore (LLD	S) applicants, answe	the following: $\mathcal{N} \not \mathcal{A}$
 a. Is there a pharmacy, license within the applicant's LLDS 		
f "yes" a copy of license must be	attached.	

9. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies) will loan or give money, inventory, furniture or equipment to or for use in this

	$A \setminus \kappa$		
12. Club Liquor License applicants answer the follow		documenta	ation
 a. Is the applicant organization operated solel patriotic, political or athletic purpose and no 		O Yes	No
b. Is the applicant organization a regularly ch of a national organization which is operate or fraternal organization or society, but not	d solely for the object of a patriotic		No
c. How long has the club been incorporated?	هالا		
d. Has applicant occupied an establishment for that was operated solely for the reasons st	[HE - HE -	O Yes	No
13. Brew-Pub, Distillery Pub or Vintner's Restauran	t applicants answer the following:	AU	
a. Has the applicant received or applied for a or application must be attached)		O Yes	No
14. Campus Liquor Complex applicants answer the	e following: NA		
a. Is the applicant an institution of higher educ	cation?	O Yes (No
b. Is the applicant a person who contracts wit education to provide food services?	1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	O Yes (No
If "yes" please provide a copy of the corto provide food services.	ntract with the institution of hig	her educa	ation
15. For all on-premises applicants.			
 a. For all Liquor Licensed Drugstores (LLDS) Manager Permit Application - DR 8000 and 		submit an	
ast Name of Manager	First Name of Manager		
Pending			
16. Does this manager act as the manager of, or had other liquor licensed establishment in the State name, type of license and account number	of Colorado? If yes, provide	O Yes	No
Name			
Type of License	Account Number		

17. Related Facility - Campus Liquor Complex applicants answer the following: $\ \mathcal{N}ig A$
a. Is the related facility located within the boundaries of the Campus Liquor Complex?
If yes, please provide a map of the geographical location within the Campus Liquor Complex.
If no, this license type is not available for issues outside the geographical location of the Campus Liquor Complex.
b. Designated Manager for Related Facility - Campus Liquor Complex
Last Name of Manager First Name of Manager
$A \setminus \mathcal{U}$
18. Tax Information.
 a. Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant, been found in final order of a tax agency to be delinquent in the payment of any state or local taxes, penalties, or interest related to a business?
 b. Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant failed to pay any fees or surcharges imposed pursuant to section 44-3-503, C.R.S.?

If applicant is a corporation, partnership, association or limited liability company, applicant must list all **Officers, Directors, General Partners, and Managing Members**. In addition, applicant must list any stockholders, partners, or members with **ownership of 10% or more in the applicant**. **All persons listed below** must also attach form DR 8404-I (Individual History Record), and make an appointment with an approved State Vendor through their website. See application checklist, Section IV, for details.

Name		Date of Bir	rth (MM/DD/YY)
DON WOODS JR.			
Street Address			
City	State ZIP (Code Position	%Owned
		PRESIDENT	19.01%
Name		Date of Bir	th (MM/DD/YY)
JOAN WOODS			
Street Address			
			-
City	State ZIP 0	Code Position	%Owned
		SECRETARY/TRE	
Name		Date of Bir	th (MM/DD/YY)
DONALD WOODS J			
Street Address			
City	State ZIP C	Code Position	%Owned
		VICE PRESIDENT	8.32%
Name		Date of Birt	th (MM/DD/YY)
Street Address			
City	State ZIP C	Code Position	%Owned
Name		Date of Birt	h (MM/DD/YY)
Street Address			
24			
City	State ZIP C	ode Position	%Owned
		-11.	

- ** If applicant is owned 100% by a parent company, please list the designated principal officer on above.
- ** Corporations the President, Vice-President, Secretary and Treasurer must be accounted for above (Include ownership percentage if applicable)
- ** If total ownership percentage disclosed here does not total 100%, applicant must check this box:
- Applicant affirms that no individual other than these disclosed herein owns 10% or more of the applicant and does not have financial interest in a prohibited liquor license pursuant to Article 3 or 5, C.R.S.

Oath Of Applicant

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Colorado Liquor or Beer and Wine Code which affect my license.

Printed Name	Title						
DANIEL JAMES SHULTZ	V.P. MARKETING						
Authorized Signature	Date (MM/DD/YY)						
Sau	7/24/24						
Report and Approval of Local Licensing Authority (City/County)							
Date application filed with local authority Date of local authority hearing	(for new						
license applicants; cannot be le 30 days from date of applicatio	ess than						
For Transfer Applications Only - Is the license being transferred	valid? O Yes O No						
The Local Licensing Authority Hereby Affirms that each person relationary Record) or a DR 8000 (Manager Permit) has been: Fingerprinted	equired to file DR 8404-I (Individual						
Subject to background investigation, including NCIC/CCIC check	for outstanding warrants						
That the local authority has conducted, or intends to conduct, an to ensure that the applicant is in compliance with and aware of, lic class of license (Check One)							
O Date of inspection or anticipated date							
() Will conduct inspection upon approval of state licensing authority							

	Is the Liquor Licensed Drugstore (LLDS within 1,500 feet of another retail liquor in a jurisdiction with a population of > 10	license for off-	premises sales	0	Yes	0	No
	Is the Liquor Licensed Drugstore (LLDS within 3,000 feet of another retail liquor in a jurisdiction with a population of < 10	license for off-	premises sales	0	Yes	0	No
doorway	he distance shall be determined by a radio of the LLDS/RLS premises for which the a of the Licensed LLDS/RLS.						cipal
	Does the Liquor-Licensed Drugstore (LLD percent (20%) of the applicant's gross and sale of food, during the prior twelve (12) m	nual income de	rived from the	0	Yes	0	No
character reasonab comply w	going application has been examined; and of the applicant are satisfactory. We do all requirements of the neighborhood and ith the provisions of Title 44, Article 4 or 3 on is approved.	report that suc the desires of	h license, if grante the adult inhabite	ed, s ants	will m , and	eet t	
Local Licen	sing Authority for	Telephone Num	ber		От	own,	City
					0 0	ounty	,
Printed Nan	ne		Title				
Signature			Date (MM/DD/YY)				
Printed Nam	ne		Title				
Signature			Date (MM/DD/YY)				



STATE of MISSOURI

JAMES C. KIRKPATRICK, Secretary of State

Corporation Department

Certificate of Incorporation

WHEREAS, duplicate originals of Articles of Incorporation of						
WOODS SUPER MARKETS, INC.						
have been received and filed in the office of the Secretary of State and which Articles, in all re-						
spects, comply with the requirements of The General and Business Corporation Law:						
NOW, THEREFORE, I, JAMES C. KIRKPATRICK, Secretary of State of the State of Missour	ri,					
by virtue of the authority vested in me by law, do hereby certify and declare						
a body corporate, duly organized this day and that it is entitled to all rights and privileg						
granted corporations organized under The General and Business Corporation Law; that the a	d-					
dress of its initial Registered Office in Missouri is						
Main Street, Buffalo,						
that its period of existence isperpetual; and that t						
* V	ile					
amount of its Authorized Shares is FIVE HUNDRED THOUSAND Dollars.						
IN TESTIMONY WHEREOF, I have hereunto set my hand a	nd					
affixed the GREAT SEAL of the State of Missouri, at the City	of					
Jefferson, this 18th day of June , 19.7	Ω.					
James Crincoatrick Secretary of State						
1 K Clay						
Deputy Secretary of State						
morry of a	4					
· · · · · · · · · · · · · · · · · · ·	•					
RECEIVED OF: WOODS SUPER MARKETS, INC.						
Two Hundred Eighty-eight and no/100 Dollars, \$ 288,00						
For Credit of General Revenue Fund, on Account of Incorporation Tax and Fee.						
NO. for DONALD C. WOODS SUPER MARKETS, INC. 18 morthogram Miller						
No. 142479 IS 142480.	واب					
CORP. No. 13 Deputy Collector of Revenue	weil					
WHICH THE IS						

STATE OF MISSOURI



John R. Ashcroft Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

WOODS SUPER MARKETS, INC. 00142479

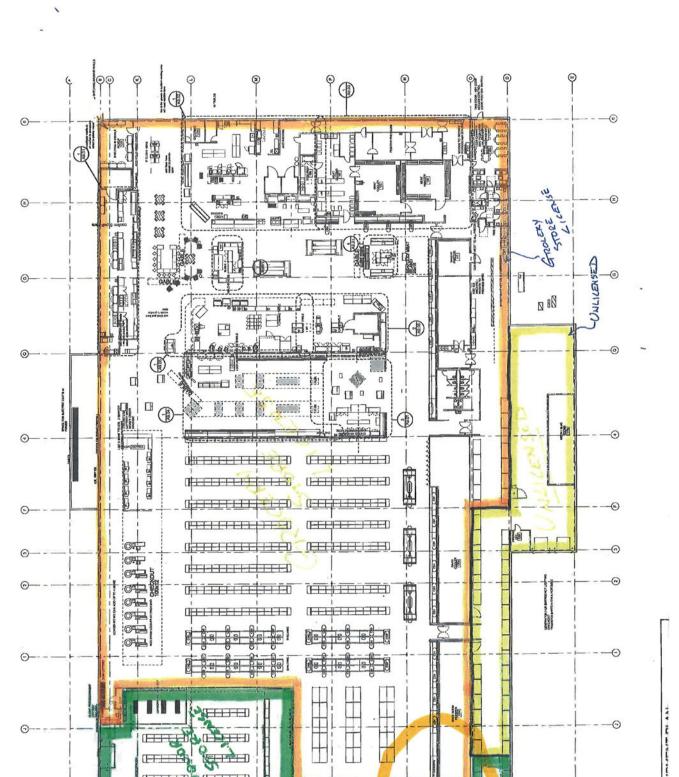
was created under the laws of this State on the 18th day of June, 1970, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 4th day of June, 2024.

Secretary of State

Certification Number: CERT-06042024-0064





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ALMEMETS & SENITS

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Tax Check Authorization, Waiver, and Request to Release Information

Information (hereinafter "Waiver") on behalf of Wand to permit the Colorado Department of Revenue and any of documentation that may otherwise be confidential, as proving including on behalf of a business entity, I certify the Applicant/Licensee.	other state or localided below. If I a	cal taxing authority am signing this Wai	to release information and ver for someone other than			
The Executive Director of the Colorado Department of It Colorado Liquor Enforcement Division as his or her agents obtained pursuant to this Waiver may be used in conne and ongoing licensure by the state and local licensing auti ("Liquor Code"), and the Colorado Liquor Rules, 1 CCR obligations, and set forth the investigative, disciplinary and take for violations of the Liquor Code and Liquor Rules, included the colorado of the Liquor Code and Liquor Rules, included the colorado of the Liquor Code and Liquor Rules, included the colorado of the Liquor Code and Liquor Rules, included the colorado of the Liquor Code and Liquor Rules, included the colorado of the Liquor Code and Liquor Rules, included the colorado of the Liquor Code and Liquor Rules, included the colorado of the Liquor Code and Liquor Rules, included the colorado of the Liquor Code and Liquor Rules, included the colorado of the Liquor Code and Liquor Rules, included the colorado of the colorado of the colorado of the Liquor Code and Liquor Rules, included the colorado of the c	s, clerks, and em ction with the A horities. The Col 203-2 ("Liquor licensure action	nployees. The infor pplicant/Licensee's orado Liquor Code Rules"), require co s the state and loca	mation and documentation s liquor license application e, section 44-3-101. et seq. ompliance with certain tax al licensing authorities may			
The Waiver is made pursuant to section 39-21-113(4), Concerning the confidentiality of tax information, or any dotaxes. This Waiver shall be valid until the expiration or revauthorities take final action to approve or deny any applicant/Licensee agrees to execute a new waiver for each of any license, if requested.	cument, report of rocation of a licer lication(s) for the	or return filed in cor nse, or until both th e renewal of the li	nnection with state or local ne state and local licensing cense, whichever is later.			
By signing below, Applicant/Licensee requests that the Cotaxing authority or agency in the possession of tax documes the Colorado Liquor Enforcement Division, and is duly authorized representative under section 39-21-113(4), C.R. their duly authorized employees, to investigate compliance authorizes the state and local licensing authorities, their duse the information and documentation obtained using this application or license.	ents or information thorized employe S., solely to allow with the Liquor uly authorized en	on, release informa ees, to act as the A w the state and loca Code and Liquor mployees, and the	tion and documentation to Applicant's/Licensee's duly allicensing authorities, and Rules. Applicant/Licensee ir legal representatives, to			
Name (Individual/Business)		Social Security Number	er/Tax Identification Number			
Down Id C Woods, Ir	d Real Control		41			
	W. B. L. R.	6.51				
City		State	Zip			
lome Phone Number	Business/Work Ph	one Number				
Printed name of person signing on behalf of the Applicant/Licensee		- 17.				
Applicant Dicensee's Signature (Signature authorizing the disclosure of confidential tax information)		tion)	Date signed 2 - 28 - 2024			
Privacy Act Statement						
Providing your Social Security Number is voluntary and no right, benefit or privilege provided by law will be denied as a result of refusal to disclose it. § 7 of Privacy Act, 5 USCS § 552a (note).						
			D- 0.40			

IMPORTANT INFORMATION

Now that you have your license, here's what you need to know:

Use the letter ID above and go to Colorado.gov/RevenueOnline to set up your online access, manage your
account, file electronic returns and submit payments. Paper returns will NOT be mailed to you.

Both your sales tax return AND payments are due by the 20th day of the month following the end date of the
reporting period in order to avoid any penalty and/or interest. Be sure you know what your filing frequency is in order
to avoid missing due dates.

Monthly filer due dates: On the 20th day of the month following the reporting period end date.

Quarterly filer due dates: April 20th, July 20th, October 20th and January 20th.

Annual filer due dates: January 20th following the reporting period end date.

- If no sales were made during the reporting period, you are still required to file a return to report zero sales were
 made during the reporting period. Otherwise, the Department of Revenue will assess a non-filer estimate for tax.
- All licensed retailers are required to collect and remit all state-collected sales taxes based on the location where their products are delivered.
- State law requires you to collect sales tax from your customers solely for the purpose of remitting those taxes to the Colorado Department of Revenue. Businesses are entrusted with collecting and remitting taxes that belong to the State of Colorado and local jurisdictions.

Your Colorado Sales Tax License must be displayed in a conspicuous place at your physical location.

- Your license must be renewed and the renewal fee paid at the end of the license period ending December 31 of
 odd-numbered years in order to maintain a valid license. Failure to renew your license will invalidate your license,
 but it won't automatically close your account. In order to close your account and cease any future liability, you must
 file form DR 1102 with the Department of Revenue.
- Having a Colorado Sales Tax License gives you the privilege to purchase non-taxable items-for-resale. Items that
 you consume in the course of your business are not included in this privilege.

We strongly recommend that you set up your Revenue Online account as soon as possible in order to remain compliant. If you have any questions regarding sales tax in Colorado, then please visit our website Colorado.gov/tax and click on "Education and Legal Research" for helpful FYIs, Regulations, Letter Rulings and Statutes. While there, you can also sign up for free Public Sales Tax Classes.

Thank you for registering with the Colorado Department of Revenue.

