

**County of Sonoma**  
**Cannabis Business Tax Return Instructions for Indoor & Mixed Light Operations**

**You may now file online! Please visit <https://sonomacounty.hdlgov.com/home/index/cbt> to get started.**

To file by mail or in person, please complete the return in its entirety. Returns are located on our website: <https://sonomacounty.ca.gov/acttc-cannabistaxforms>. Incomplete returns may be rejected and subject to penalties and interest. If you are having trouble completing the form, please contact our office by email at [CannabisTax@sonoma-county.org](mailto:CannabisTax@sonoma-county.org).

1. Select the Tax Return for Indoor/Mixed Light Cultivation Permits.
2. Fill in all information at the top of the form.
  - Permit Number: The number assigned to your business by Permit Sonoma (PRMD) or the Department of Agriculture, Weights, and Measures (Department of Agriculture). ("APCXX-XXXX", "UPCXX-XXXX", or "ZPCXX-XXXX").
  - Business Name
  - Business Address
  - Mailing Address
  - Email
3. Select the correct reporting period.
4. Select the correct permit type.
  - Please note that you may have applied for more than one cannabis business operation type during the application process with PRMD or the Department of Agriculture. It is your responsibility to report and pay applicable tax for each separate operation on separate tax returns; please use the same Permit Number on each separate form.
5. Enter the cultivation size.
  - Loss Determination Adjustment must be approved by the Department of Agriculture. In the event you have not received valid approval, pay the full amount. Any Department of Agriculture approved adjustments will be refunded by the Tax Collector.
6. Enter the date paid, this should be the day the return will be postmarked if mailed or the date payment is brought in person to our office.
  - In the event payment is received by our office after the due date, penalties and interest will be assessed.
7. The remaining fields will automatically calculate based on the information entered above. The form needs to be completed electronically for the calculations to work correctly.
8. Sign and date the bottom of the form. Forms without a signature are not considered complete and will not be accepted.

**Returns and remittances should be mailed or brought to:**

Sonoma County Tax Collector  
Attn: Cannabis Tax  
585 Fiscal Drive, Suite 100  
Santa Rosa, CA 95403

If you have any questions, please contact our office by email at [CannabisTax@sonoma-county.org](mailto:CannabisTax@sonoma-county.org)



# Cannabis Business Tax Return – Indoor & Mixed Light Operations

AUDITOR-CONTROLLER TREASURER-TAX COLLECTOR DEPARTMENT

585 Fiscal Drive, Suite 100, Santa Rosa, CA 95403

Phone: (707) 565-7420

Email: [CannabisTax@sonoma-county.org](mailto:CannabisTax@sonoma-county.org)

Permit Number: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

## SELECT TAX PERIOD:

## DUE DATE:

1st (July-Sept)	2nd (Oct-Dec)	3rd (Jan-March)	4th (April-June)
Permit Type:	Tax Rate: per sq ft	Cultivation Size:	square feet
Date Paid:		Number of Months Late:	
<b>2024 - 2025 QUARTERLY TAX DUE:</b>			
<b>PENALTIES &amp; INTEREST</b>			
If payment is received after the due date, penalties and interest must be calculated and remitted.			
1st Penalty: 10% of tax due if 1 month late			
2nd Penalty: 10% of tax due if 2 months late			
Interest: 1.5% of tax due for each month late			
Subtotal of Penalties & Interest:			
<b>TOTAL TAX, PENALTIES &amp; INTEREST DUE – PAY THIS AMOUNT</b>			

I declare under penalty of perjury that the above is true and correct to the best of my knowledge.

Signature: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Make checks payable to Sonoma County Tax Collector. Submit form and payment to the address above.

Office Use Only:
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