

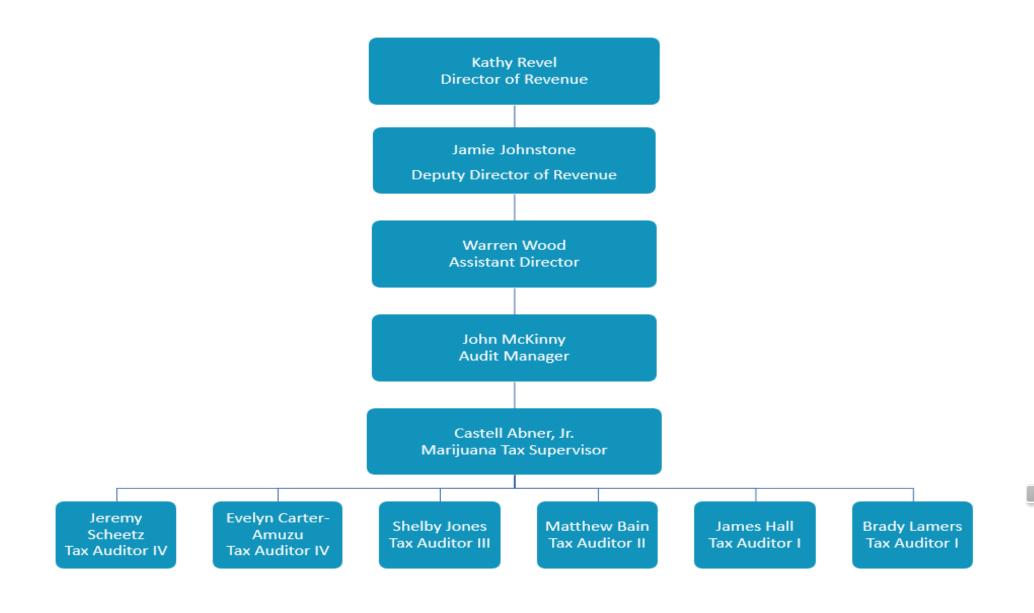
Doing Business in Delaware Pt2:

Cultivating and Manufacturing Marijuana

February 2025

Marijuana Tax and Business-Related Taxes Organization Chart







Key Contacts

Marijuana Tax Department Email Contacts

- Dor marijtax@delaware.gov
- Brady Lamers <u>Brady.Lamers@delaware.gov</u>
- > James Hall James.Hall@delaware.gov

Immediate questions or concerns please call 302-577-8200

Inquiries will be responded to within 24 hours

DOR Marijuana Staff

Castell Abner Jr.

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AGENDA

- Process Overview for Marijuana Establishments
- Navigating Delaware ONE STOP
 - > Set up Business Account
 - Obtain Business License
 - > Set up Withholding Account
- Licensing in the Delaware Marijuana Control Act
- Tax Certification and Related Costs

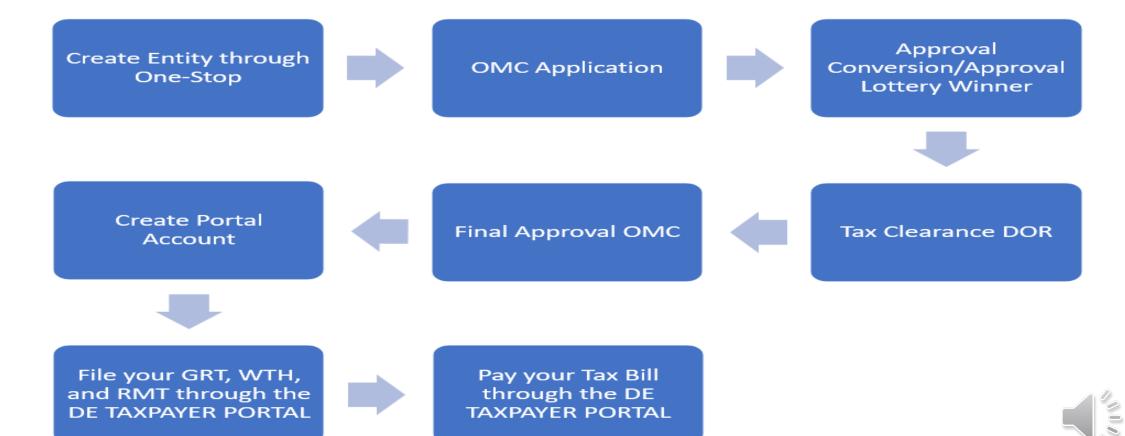
- Navigating Delaware Taxpayer PORTAL
 - Renew Business License
 - ➤ File Gross Receipts
 - ➤ File Withholding Tax
- Gross Receipts Tax (GRT)
- Example GRT
- Other Business-Related Taxes
- Key Contacts







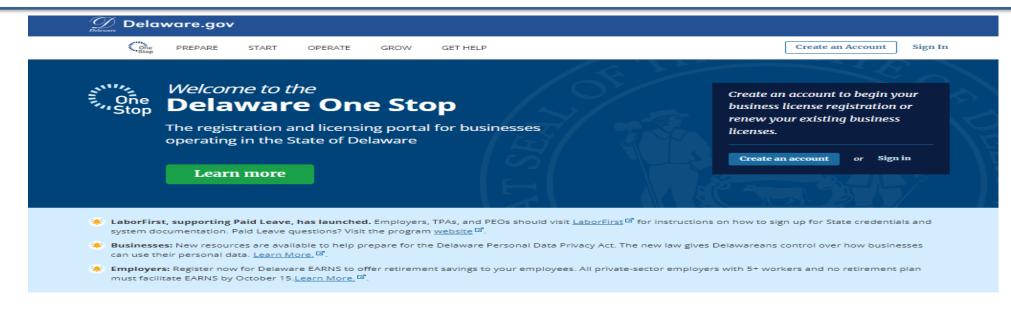
Process Overview for Marijuana Establishments





Navigating One Stop https://onestop.Delaware.gov







Learning

Get all the information you need to form a new business in Delaware.

Get started



Registration

Register and license your business in the State of Delaware.

Get started



Licensing

Add, renew, change or close licenses for your Delaware registered business.

Get started



Hiring

File as a new employer in the State of Delaware.

Get started



Withholding

Register your out-of-state business as a Delaware withholding agent.

Get started







Navigating One Stop

- ADD, RENEW, OR MODIFY LICENSES
 - If you've already registered your business with the Delaware Division of Revenue, you can create an account or log in to the new One Stop to renew, modify, add or close your business license.
- Checklist for renewing, adding, changing, or modifying a license:
 - ➤ Login information for your existing One Stop Account
 - ➤ Business License Number, found on your business license or in your One Stop account.
 - Method of payment
 - ➤ Visa, MasterCard, Discover, and American Express are accepted
 - ✓ Debit Cards with a credit card brand are also accepted
 - ✓ The card billing address must be in the U.S.
 - > ACH Debit transactions are accepted







Navigating One Stop

- How long would you like to renew (one or three years)?
 - Division of Revenue licenses are issued by calendar year. You can renew each year, or you can choose a three-year renewal option.
 - There is only a <u>one-year</u> option the first time you get the license.
- Have you become an employer?
 - If you have grown from zero employees to one or more employees, you will need to open a withholding account with the Division of Revenue and register as an employer with the Division of Unemployment Insurance and the Office of Worker's Compensation with the Delaware Division of Labor.





Licensing in the Delaware Marijuana Control Act

New Business Licensees:

▶60 cultivators licenses, 30 manufacturers, 30 retailers, 5 testers have been issued

	11/01/2024 <u>Cultivation</u>	12/01/2024 Manufacturing	3/01/2025 <u>Testing Lab</u>	3/01/2025 Retail Establishment
Open	4 Del.C. § 1334	4 Del.C. § 1335	4 Del.C. § 1333	4 Del.C. § 1332
Social Equity ≥2500 ft.	4 Del.C. § 1334 (b)(3)b			
Social Equity ≤2500 ft	4 Del.C. § 1334 (b)(3)a			
Social Equity		4 Del.C. § 1343 (d)(2)	4 Del.C. § 1343 (e)(2)	4 Del.C. § 1343 (e)(1)
Microbusiness	4 Del.C. § 1343 (c)(1)a	4 Del.C. § 1343 (d)(3)		







Licensing in the Delaware Marijuana Control Act

- Conversion Licenses 4 Del.C.§1335A:
 - Have been issued to a currently licensed compassion centers
 - The base conversion fee is \$100,000, which may be paid in quarterly installments over 12 months
 - If the conversion license is for a cultivation facility, the base conversion license fee is \$200,000, which may be paid in quarterly installments over 12 months
 - If the conversion license is in a jurisdiction that prohibits the operation of an open license, the registered compassion center may request an open license in a new location







Licensing in the Delaware Marijuana Control Act

Likely Business License Types						
OMC License	Revenue License	License Fee				
Testing	General Services	\$75 + \$25 license fee for an additional location				
Cultivation	Wholesale	\$75 per site				
Manufacturing	Food Processor	\$75 per site				
Manufacturing	Manufacturers	\$75 per site				
Retailer	Retail Sales	1 ST location: \$90 (\$75 + \$15 crime fee) Additional locations: \$40 (\$25 + \$15 crime fee per site)				







Tax Certification and Related Costs

- OMC license applications and renewals will require Certificates of Tax Clearance for corporations and/or individuals with substantial ownership in a marijuana related business (MRB).
 - > Required forms: Form ATH-RTF (formerly DE8821) and Form CLR-APP
 - The fee for this service is \$40 for corporations and \$20 for individuals
 - Expected turn around is 2 weeks, though marijuana and alcohol license requests are given priority
 - Tax Clearance Certificates will not be issued if there is an outstanding balance with the Division of Revenue
 - Tax Clearance is only good for 60 days



Example ATH-RTF

FOR EXAMPLE ONLY



DELAWARE ATH-RTF



AUTHORIZATION TO RELEASE TAX INFORMATION FORMERLY 8821DE

Read Instructions before completing the form.

R⊑SET

🖨 PRINT

Completion and submission of this form authorizes the Delaware Division of Revenue to release confidential information of the Taxpayer(s) named below to the authorized person(s) or organization named below for the tax type(s) specified below. This form does not give Power of Attorney and does not grant the authorized person(s) or organization any powers of representation. Unauthorized disclosure of tax information is a criminal offense.

Your Nam	e Or Name Of Entity				You	ır Tax	paye	r ID					
JOHN DO	E				4	2	3 4		6	7	0	0	
Spouse's I	Name (if joint or corporate officer,	partner or fiduciary if a but	iness)			2	3 4	+ 3	0	-	0	9	
					Spo	use 1	Гахра	ıyer I	D (if a	joint	returr	n)	
Street Add	dress												
123 MAIN	STREET												
City		Stat	e Zip Co	de									
WILMING	TON		DE	19801									
authorize the f	following person or organizat	ion to inspect and/or	receive private	and non-pu	blic informati	ion in	regar	d to th	ne tax	c type	es an	nd pe	riods provided below
AUTHORIZ	ED PERSON OR ORGANIZAT	ION											
Name of p	oerson or organization to	receive tax informa	ation		Nan	ne of	firm	(if ap	plica	able)			
YOUR AU	THORIZED PERSON												
Street Add	dress												
123 MAIN	STREET												
City		Stat	e Zip Co	de									
WILMING	TON		DE	19801									
Phone Nu	mber		Fax Nu	ımber									
(302) 123	-4567		(302)	123-4568									
The above pers	on or organization is authoriz	red to receive the follo	wing tax infor	mation (chec	k all that app	ly):							
TAX INFOR	MATION												
TAX	TYPE		YEAR(S	OR PERIOD	(S)								
Indi	vidual Income	From		To				_					nber should fill ou
Corp	porate Income	From		То				se	para	ite #	(IH	-KII	form"
Pass	s-through Return	From		To									
Gro	ss Receipts	From		To									
× With	holding	From	11-01-2024	То	12-31-20	025							
V Mar	ijuana	From	11-01-2024	То	12-31-20	025							
_ Iviai													

The authorization to release tax information is not valid until it is signed and dated. It will expire 60 days after the information is released. By signing this form, I hereby certify that the Delaware Division of Revenue is authorized to release any and all confidential information concerning the above-mentioned Taxpayer under penalty of law. A copy of this form will be mailed to the individual(s) authorizing the release.

	11-01-2024		
YOUR SIGNATURE	⊞ DATE	SPOUSE SIGNATURE	™ DATE
JOHN DOE			
T PRINT NAME		T PRINT NAME	
YOUR TITLE			
T PRINT TITLE (if applicable)		Ø PHONE NUMBER	
		MAIL COM	IPLETED FORM TO:
PHONE NUMBER		Dek	aware Division of Revenue 820 North French Street

Form ATH-RTF Instructions

nington, DE

13

CLR-APP



FOR EXAMPLE PURPOSES ONLY

DELAWARE CLR-APP



PRINT

RESET

I. Name of Business/Taxpayer					Tax	cpayer ID	Number (F	FEIN or SSN)	
JOHN DOE or JOH	N DOE H	ARVE	STING LLC			123	-45-678	39	
2. Address of Business/Taxpayer									
P.O. Box or Street and Number					P	hone Num			
123 MAIN ST							-999-12		
City or Town		County				State	Zip (Code	
WILMINGTON			_ N	IEW CASTL	E	D	E 198	305	
3. Name, Address and Phone No.	of Attorney	or Rep t	o whom Cleara	nce Certificate	should be ser	nt (if diffe	rent from	#2)	
Name			P.O. Box or Str	eet and Number			Pho	ne Number	
City or Town			County			State	Zip (Code	
 Name(s), Home Address(es) an the Corporation or Chief Execu 							stee, Pres	ident and Treasu	urer of
	tive Officer o	or major			sting it necess				
lame			Social Securi	-		Phone No			
JOHN DOE			123-45	-0789		302-	999-12		
O.O. Box or Street and Number			City				State	Zip Code	
Time of Business									
5. Type of Business	and in Dec		Faraian Carre	entine feet in	and in DD		in delega	Tours	
Domestic Corporation (Incorpo	oraced in DE)			ration (not incorp	porated in DE)		Liquidating		
Partnership Association			Proprietorship Business Trust					bility Company	
Limited Liability Partnership			Other (Specify)					Corporation copy of S01(c) exemption	letter)
	If Foreign Co	rporatio	on, give state					,	
If Domestic Corporation, give incorporation date.	where incor	porated	and Date of y in Delaware.		usiness starte Delaware	d	ı	Date Terminated	
01/01/2024				01/01	1/2024				
Registered Delaware Address, P.O.	Box Street ar	od Numb	ner .						
agonated Denomine Pouress, F.O.	Dan, Saleet di								
ity or Town			County				State	Zip Code	
,			County				June	Esp code	
 Describe the business activity etail. If sales or construction are in ervices or execute sales on behalf endered and what type of sales w 	of the entity r	e explair	. If manufacture	er's representativ	ves or indepen	ndent contr	actors per	form activities, re	nder
MARIJUANA CULTIV	/ATION O	R MA	RIJUANA	MANUFACT	TURER				
. Did the entity have employees	for which DE	LAWAR	E personal inco	ome tax was red	quired to be w	vithheld fr	om wage:	s? Yes	No
yes, explain.							- 3-		
. Did taxpayer ever hold any of	the following	license	s, permits or a	ccounts with th	e State of Del	laware?			
a) Corporation Tax		Yes X	No Period	to		_	ue ID No.		
) Liquor License		Yes X	No Period	to	D		cense No.		
) Motor Fuels		Yes X	No Period	to	D	P	ermit No.		
d) Cigarette and/or Tobacco Tax		Yes X	No Period	to	D	Li	cense No.		
e) Public Accommodations Tax		Yes X	No Period	to		_	cense No.		
Motor Carrier		Yes X	No Period	to		Li	cense No.		
g) Lottery		Yes X	No Period	to		_	Agent No.		
h) Public Transportation Assistance	e	Yes X	No Period	to	0	_	cense No.		
Delaware Unemployment Comp		Yes X	No Period	to	_		count No.		
) Marijuana Retail Store		Yes X	No Period	to		-	cense No.		
k) Marijuana Testing Facility		Yes X	No Period	to			cense No.		
l) Marijuana Cultivation Facility		Yes X	No Period	to			cense No.		
m) Marijuana Product Manufactur	ing	Yes X	No Period	to			cense No.		
ny mangadina ri roduce manulaceur	6	. 43	1.10	U		CHIC LI	certae 140.		

CLR-App - Page 2







9. Were the assets or acti (If "Yes", give predecessor				e or in part from	a prior b	usiness	entity?	Ye X Ni			
Name								Acquisitio	n Date		
P.O. Box or Street and Nun	nber						Phone Nu	ımber			
City or Town			County					State	Zip Co	ie	
10. Has the business held	title to any	real estate in th	he last five y	ears from the da	te of thi	s applic	ation?	Ye	s X No		
 If "Yes", complete Sch If you currently hold 	iedule A (Page title to real es	e 4). tate in Delaware	, complete S	chedule B (Page 5)_						
11. Will the assets or acti	vities of the	business be tra	nsferred to	another?							
(a) Corporation	Yes X No	If Other, Explain	n:	Name of New O	wner						
(b) Partnership	Yes X No										
(c) Proprietorship	Yes X No			Street Address	of New O	wner					
(d) Liquidating Trust	Yes X No										
(e) Association	Yes X No			City				Sta	rte Zig	Code	
(f) Other	Yes X No										
12. Purpose of clearance	certificate (c	heck appropriat	e block):								
A. Dissolution of Entit	y through De	epartment of Sta	ite.					Da	te		
B. Dissolution of Entit	y through Co	urt of Chancery	. Date Court	was petitioned a	nd count	y:					
C. Withdrawal of Fore	ign Entity thr	ough Departme	ent of State.								
D. Merger or consolid	lation of two	or more Entities	where survi	iving Entity is not	subject t	o the ju	risdiction of	Delaware.			
E. Liquor License											
X F. Marijuana License											
G. Other											
13. Location of business r	records, avail	lable for audit o	of Delaware	Operations.							
P.O. Box or Street and Nun	nber						Phon	e Number			
123 MAIN ST							3	02-999-	1234		
City or Town			Co	unty				Sta	ite Zip	Code	
WILMINGTON			1	NEW CAS	STLE				DE 19	9805	
14. List any matters pend	ing with the	Delaware Divis	ion of Rever	nue (e.g. petitions,	appeals)						
15. Did the business ever	, within the S	State of Delawa	re								
(a) Engage in the sale or lea	ase of tangible	e personal prope	erty since Sep	ot. 1, 1953?		Yes	No Po	eriod	to	3	
(b) File Delaware Unemploy	yment Compo	ensation				Yes	No Po	eriod	to	>	
If "Yes", give Account No.			(See qu	estion 8i.)							
16. Have you terminated	your busines	ss activities in [Delaware						Ye	s	No
If "Yes", give distribution of	assets date:										
If "No", explain:											
If a Foreign Corporation, he	ave you termi	nated business i	in the state o	f your incorporati	on?				Ye	s	No
17. Number of employees	s and total gr	ross payrolls du	ring the last	t five operating y	ears (as	reported	to the Socia	al Security /	Admin.)		20
Year	Total Er	mployees	Delawar	e Employees	Tot	al Gross	Payroll	Del	aware Gro	ss Pa	
					S		-	\$			
								\$			
					S			\$			
								\$			

CLR-APP — Page 3



FOR EXAMPLE PURPOSES ONLY SION OF REVENUE CLK-A



calendar year or during any of the preci	eding four calendar years? ormed for the business in Delaw ent Compensation Law? uring the last five years: port:	or services performed in Delaware during the cu vare, which you believe did not constitute "emp	Yes X No
as defined in the Delaware Unemploym If "Yes", explain: 20. A. Average number of stockholders d	uring the last five years:		oloyment" Yes X No
20. A. Average number of stockholders d	port:	adled the corporation's stock:	
_	port:	ndled the corporation's stock:	
_	port:	ndled the corporation's stock:	
B. Number of stockholders as of this re		adled the corporation's stock:	
	ock transfer agents who have har	idled the corporation's stock:	
C. List names and home addresses of st			
Name		Address	
D. Were all shares presented and prope	cty redeemed from any stock calls	ed for redemption or retired?	Yes X N
		with the Delaware Division of Revenue.	
Date of Report:	MM DD YYYY	Total Liabilities:	
Total Assets: S		Total Equity (net worth):	S
22. A. List the amount of corporate bond	s issued and still outstanding a	s of this report.	
Show each issue separately and include r	name and address of any transfer	or paying agents.	
Issue A	gent	Number of Outstanding Bonds	Amount
			S
		who have handled corporate bond issues.	
Name A	ddress		
payroll, deposits, outstanding checks, st	ock certificates, unidentified depo	and unclaimed (escheatable) funds or assets sur osits, accounts payable debit balances, gift certi r missing shareholders or other unclaimed amo	ficates, Yes X No
24. Has the business filed a Delaware Aban	doned and Unclaimed Property R	eport for the preceding year?	Yes X No
		special displaced years	165 77 110
CERTIFICATION: I certify that the informati my knowledge, true and correct. (Certificati		if applicable) on this application has been exan ted in Question 4)	nined by me and is, to the best of
			302-999-1234
© AUTHORIZED SIGNATURE		≜ DATE ∂PE	HONE NUMBER
Delaware Di	none inquiries to the vision of Revenue at:	Mail a copy of this form with Form 8821 D Tax Information) along with a check in the (Individual) made payable to Delaware Div Office of Tax Enforcement Delaware Division of Revenue 820 North French Street Wilminston DE 19801	amount of \$40 (B) in less 1/320

Tax Clearance Letter



September 19, 2024

COMPANY XYZ 123 MAIN ST Wilmington, DE 19801

RE: DELAWARE DIVISION OF REVENUE – TAX CLEARANCE CERTIFICATE

Taxpayer Name: COMPANY XYZ
Taxpayer I.D. Number: 85-xxxxx28

Dear Sir\Madam:

The State of Delaware Division of Revenue ("Revenue") certifies that, according to its records as of the date of this correspondence, the above-referenced taxpayer has filed all required State of Delaware tax returns and paid all tax reported thereon, including penalties and interest if applicable, and does not currently owe any tax to Revenue. This certification does not extend to returns that are not required to be filed as of the date of this correspondence or that have been filed but not yet processed by the Delaware Division of Revenue.

The issuance of this certificate does not limit the authority of Revenue to hereinafter assess, and/or collect future liabilities that may arise in connection with the Taxpayer's account, or that may arise upon default of a payment agreement entered into with Revenue or that become known to Revenue as a result of a subsequent audit, review of taxpayer records, or determination of successor liability.

THIS CERTIFICATE REMAINS VALID FOR 60 DAYS FROM THE ISSUANCE DATE

DELAWARE DIVISION OF REVENUE

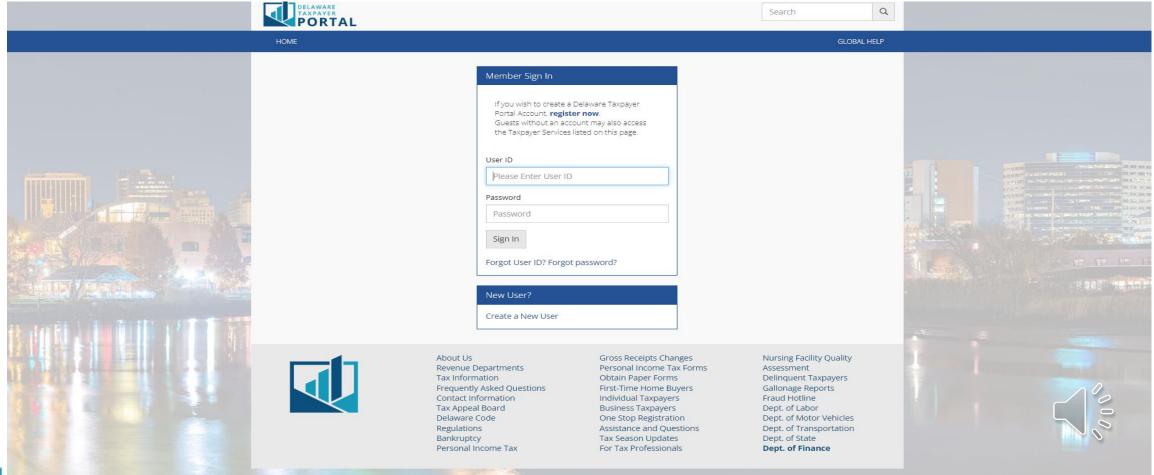
By:	
	Castell Abner, Jr.
By:	
•	Warren D. Wood
	Assistant Director



Navigating Delaware Taxpayer PORTAL



https://tax.Delaware.gov







Navigating Delaware Taxpayer PORTAL

- Create Portal Profile
 - To Complete the registration process and view your authorized accounts, you will need to know your FEIN or SSN and have your Portal Identification Number (PIN), which you should have received in a letter from the Division of Revenue. If you have not received your PIN, please contact us."
- Link Tax Accounts
 - There can be different accounts for the same entity
- Add an Authorized User
- View Correspondence History
- File a Personal Income Tax Return with a Payment
- File an Amended Personal Income Tax Return







Navigating Delaware Taxpayer PORTAL

- Licenses
 - ➤ View Licenses
 - > Renew Licenses
- Service Requests
 - ➤ Create and Submit a Service Request
- Payment Plans
 - ➤ Request a Payment Plan
 - ➤ Make a One-Time Payment
 - ➤ Manage Auto Pay







Gross Receipts (GRT)

- Delaware does not currently impose a sales tax on typical sales
- Gross receipts includes total consideration received by manufacturers and cultivators
 for all goods sold or services rendered within the State. Consideration for goods sold or
 services rendered includes cash, checks, credit cards, gift certificates, traveler's checks,
 money orders, barter, trade-ins, manufacturer's coupons and rebates and any other
 consideration of any kind.
- Gross Receipts Tax Returns have a large monthly exclusion, but no deductions
- If you derive income from multiple license types, you will require multiple licenses
- Must file Gross Receipts Tax Return even if there is no balance due
- All Gross Receipt Tax Returns must be filed electronically via the Tax Portal. We do not accept paper returns





Gross Receipts (GRT)

	Likely Busin	ess License Types		
OMC License	Revenue License	Monthly Exclusion	Tax Rate	
Testing	General Services	\$100,000	0.3983%	
Cultivation	Wholesale	\$100,000	0.3983%	
Manufacturing	Food Processor	\$100,000	0.1991%	
Manufacturing	Manufacturers	\$1,250,000	0.1260%	
Retailer	Retail Sales	\$100,000	0.7468%	



















ESS NAME AND ADDRESS	TAXPAYER ID	AMENDED
tone Revel Farms		
Jnknown Rd.	TAX PERIOD STARTING	10-01-2024
	TAX PERIOD ENDING	10-31-2024
y 10W11, DE 23321	DUE ON OR BEFORE	11-15-2024
TOTAL GROSS RECEIPTS	\$	1,000,000.00
EXCLUSION AMOUNT	\$	100,000.00
TAXABLE GROSS RECEIPTS	\$	900,000.00
GROSS RECEIPTS RATE		.3983 %
GROSS RECEIPTS TAX DUE	■ \$	3,584.70
NEW BUSINESS FACILITY CREDITS	\$	0.00
TOTAL TAX DUE	\$	3,584.7
	tone Revel Farms Inknown Rd. y Town, DE 29321 TOTAL GROSS RECEIPTS EXCLUSION AMOUNT TAXABLE GROSS RECEIPTS GROSS RECEIPTS RATE GROSS RECEIPTS TAX DUE NEW BUSINESS FACILITY CREDITS	tone Revel Farms Inknown Rd. Inknown Rd. Inknown, DE 29321 TOTAL GROSS RECEIPTS EXCLUSION AMOUNT TAXABLE GROSS RECEIPTS GROSS RECEIPTS RATE GROSS RECEIPTS TAX DUE NEW BUSINESS FACILITY CREDITS TAX PERIOD STARTING TAX PE





Delaware Withholding Tax

- If paying wages or other renumeration, must file withholding.
- Q. How do I open a withholding account with the State of Delaware?
 - To open a withholding account: Register online using the <u>One Stop-Business</u> <u>Licensing and Registration</u> system
- Q. What are Delaware's withholding requirements?
 - Please visit Delaware's **Employer's Guide** for withholding regulations and employer's duties.
- Q. What penalties apply to late filing and/or payment of withholding tax?
 - Withholding tax returns filed late are subject to a penalty of 5% per month, plus interest of 0.5% per month from the original due date until paid. In addition to the above penalties and interest, an additional penalty of 1% per month (not to exceed 25%) is imposed for failure to pay (in whole or in part) the tax liability shown to be due on a timely filed return. (30 Del.C., Sec. 533 & 534)





Electronic Payment Only

- All Delaware Gross Receipts and Withholding payments will only be received via the Delaware Portal (tax.delaware.gov)
- Cash payment requests will be politely turned away based on long standing DOR policy.
- Departmental policy will not consider an initial attempt to pay by cash as the effective date for payment of the tax.





Delaware Related Tax Information



Deduction for Ordinary and Necessary Business Expenses:

• Delaware only credit for the amount equal to the ordinary and necessary business expenses paid or incurred for the taxable year by a marijuana business operating...which is disallowed as a deduction for federal purposes pursuant to § 280E of the Internal Revenue Code [26 U.S.C. § 280E].

Corporate Income Tax Extension

• Delaware corporate income tax returns are due in the case of a calendar year taxpayer, on or before April 15 of the following year. In the case of a fiscal year taxpayer, the return is due on or before the fifteenth day of the fourth month following the close of the fiscal year. Please note a federal extension automatically extends the Delaware due date. An extension of time to file is not an extension of time to pay

Personal Income Tax Extension

To extend your due date for submitting your completed income tax return (from April 30, 2025 to October 15, 2025 submit the following to the Division of Revenue no later than April 30, 2025. 1. The completed copy of Form PIT-EXT; and 2. Your payment of any balance of tax liability estimated to be due for tax year 2025.





Other Business Related Taxes

- Schedule C Single Member LLC or Sole Proprietor
- 1065 U.S. Return of Partnership Income
- 1120-S U.S. Income Tax Return for an S Corporation
- 1120 U.S. Corporation Tax Return Income Tax Return
- Unemployment Tax https://labor.delaware.gov/divisions/unemployment-insurance/employer-services/
- Franchise Tax https://corp.delaware.gov/paytaxes/







Key Contacts

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- Brady Lamers <u>Brady.Lamers@delaware.gov</u>
- > James Hall James.Hall@delaware.gov

Immediate questions or concerns please call 302-577-8200

Inquiries will be responded to within 24 hours

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Shelby Jones - Shelby Jones - Shel

Matthew Bain - Matthew.Bain@delaware.gov

Brady Lamers — <u>Brady.Lamers@delaware.gov</u>

James Hall — <u>James.Hall@delaware.gov</u>





Questions



- When should we apply online for licensure on One Stop?
 - Part of OMC application process is to have a business license. Usually this is the first thing that is done after receiving your FEIN and setting up your corporation.
- Is any action needed for the calendar year 2024?
 - We cannot give tax advice, but know that, by law, anyone transacting business in Delaware needs a license before business can begin serving the public, again part of OMC application process is to have a business license.
- When do we start filing monthly?
 - Monthly filing would begin on the 15th of the month following a business' first month of reportable receipts.
- If my original Tax Clearance has expired, what must be done to get it renewed?
 - If there are no changes to the business structure and or members of ownership, we are asking that
 you resend in the ATH- RTF. The fee is waived the second time. IF there is a new partner added and
 or the business structure has changed in some way, we will request new forms as well as paying
 the fee.



Questions

THANK YOU!!!



