**GOVERNMENT OF THE DISTRICT OF COLUMBIA**
Alcoholic Beverage Regulation Administration

**INSTRUCTIONS – ALCOHOLIC BEVERAGE AND FOOD QUARTERLY STATEMENT**

The following instructions are intended for holders of an Alcoholic Beverage Control restaurant or hotel license Class CR, DR, CH or DH when completing quarterly statements. Please duplicate this form for each quarter, complete it, sign and submit the form by the respective quarterly due dates. Additionally, you can make your submission by using the online application available on ABRA’s website at ABRA.dc.gov.

**LICENSE INFORMATION**
1. Print the trade name of the establishment, as it appears on the ABC license.
2. Print the address of the establishment.
3. Print the owner(s) and/or corporation name.
4. Print the establishment's ABC Board approved level of occupancy (Certificate of Occupancy submitted with your application.)
5. Print the license number.
6. Print the license class.
7. Print the Federal Employment Identification Number (FEIN).
8. Print the establishment’s phone number.

**SALES**
9. Enter food* sales for the reporting quarter.
10. Enter alcohol sales for the reporting quarter.
11. Total of lines 9 & 10.
12. Enter amount of miscellaneous** sales.
13. Calculate total gross sales (Add lines 11 & 12).
14. Calculate percentage of alcoholic beverage sales (Divide the amount on line 10 by the amount on line 11 then multiply by 100).
15. Calculate percentage of food sales (Divide the amount on line 9 by the amount on line 11 then multiply by 100).
16. Calculate the dollar amount of food sold per seat (Divide the amount on line 9 by the amount on line 4).

**EXPENDITURES**
17. Calculate amount of expenditures for food for the above period.
18. Calculate amount of expenditures for alcoholic beverages for the above period.
19. Calculate total expenditures for food and alcoholic beverages (add lines 17 & 18).
20. Enter amount of expenditures for miscellaneous items.
22. Percentage of food expenditures (Divide the amount on line 17 by the amount on line 19 then multiply by 100).
23. Percentage of alcoholic beverage expenditures (Divide the amount on line 18 by the amount on line 19 then multiply by 100).

**SUBMISSION**
24. Print your name, title, and your phone number in the designated fields.
25. Submit the form to ABRA via mail or hand delivery to 2000 14th Street, NW Suite 400S, Washington, DC 20009. Alternatively, submissions may be made via fax: (202) 442-9563 or email to Quarterlyfiling.abra@dc.gov.
26. Retain a copy for your records.

**DEFINITIONS**

* "Food* means any substance consumed by human beings except alcoholic beverages and any nonalcoholic liquid or solid substance served as part of the contents of an alcoholic beverage drink.

** "Miscellaneous" sales mean any sales except for food and alcoholic beverages. For example, Cover charges or entertainment fees are miscellaneous sales.

Pursuant to D.C. Official Code § 25-101(43), restaurants are required to meet either one of two requirements for food sales (among other requirements). These are either gross annual food sales of $1500 (class DH) or $2000 (class CR) per occupant, or food sales of 45% of gross annual receipts. Pursuant to D.C. Official Code § 25-113(e)(5), hotels are required to meet either one of two requirements for food sales (among other requirements). These are either gross annual food sales of $1500 (class DH) or $2000 (class CR) per occupant or food sales of 45% of gross annual receipts, or 25% of gross annual receipts for hotel dining rooms built before January 1, 1940. You may be required to justify your figures to the Alcoholic Beverage Regulation Administration. Pursuant to District of Columbia Official Code § 25-823(1) and 23 DCMR § 800, the failure to file this report by the required due date may subject you to civil fines and other penalties.

**SPECIAL NOTICE**

The District of Columbia will provide the appropriate services and auxiliary aids, including sign language interpreters, whenever necessary to ensure effective communication with members of the public who are deaf, hearing impaired or who have other disabilities affecting communications. Requests for services and auxiliary aids should be made at least ten (10) days prior to any scheduled hearing. Please notify ABRA at (202) 442-4423.