# State of Georgia Department of Revenue




**KEEP THESE INSTRUCTIONS AND WORKSHEET WITH YOUR RECORDS**

## Instructions

1. Download (free) the latest version of Adobe Reader.
   adobe.com/products/acrobat/readstep2.html
2. Complete the worksheet below to automatically create your return.
3. Click the "Print" button to print a completed G-7 QUARTERLY RETURN for MONTHLY PAYER return.
4. Sign and date the return.
5. Cut the return along the dotted line. Mail only the return and payment (if required) to the address on the return.

**DO NOT** fold, staple or paper clip items being mailed.

| G-7 Quarterly Return for Monthly Payer Worksheet | | | | | | | |
|---|---|---|---|---|---|---|---|
| 1. **GA Withholding ID:** | | 2. **FEI Number:** | | | | | |
| 3. **Name:** ..... | | | | | | | |
| 4. **Street Address Line 1:** | | | | | | | |
| 5. **Street Address Line 2:** | | | | | | | |
| 6. **City:** | | 7. **State:** | | 8. **Zip:** | | - | 0000 |
| 9. **Telephone Number:** | | | | | | | |
| 10. **Amended Return:** | | | | | | | |
| 11. **Tax Period:** ..... | | | Select | | | | |
| **Months In Quarter:** | Month 1 | Month 2 | Month 3 | | | | |
| **Tax Withheld This Period** | | | | | | | |
| **Adjustment to Tax (+ or -)** | | | | | | | |
| **Tax Due** | $0.00 | $0.00 | $0.00 | | | | |
| **Tax Paid** | | | | | | | |
| **Quarterly Total** | $0.00 | **Amount Enclosed:** | | | | | |
| 12. **Explanation For Adjustment (115 Characters):** | | | | | | | |
| | | | | | | | |

Print Clear

## Instructions for Completing the G-7 Quarterly Return for the Monthly Payer

- **Form G-7 MUST be filed**, even if no tax was withheld for a particular quarter or if payment was made via EFT. If a payment is enclosed, be sure to indicate the amount in the "Amount Paid" block. ANY payment received after the 15th of the following month will be subject to late charges.
- If the due date falls on a weekend or holiday, the tax shall be due on the next day that is not a weekend or holiday.
- **Complete the sections for first, second and third month.** The "Tax Withheld", "Tax Due" and "Tax Paid" blocks must be filled in with the necessary tax information. The "Adjustment to Tax" block should be used when using a credit from a prior period. Explain adjustments in the indicated area of the form. If you have to later report an additional amount withheld for a period or need to pay additional tax due for a period, file an amended return (check the amended return box) reporting the amended amounts on the appropriate lines. Do not use the adjustment to tax box.
- Enter the total amount of taxes withheld for the quarter in the "Quarterly Total" block.
- Submit Form G-7 on or before the last day of the month following the quarter. Late returns will be assessed a penalty equal to $25.00 plus 5% of the total tax withheld on the return each month the return is late, not to exceed $25.00 plus 25% of the total tax withheld on the return.
- Payers should not file a Form G-7 with every payment. All payments should be submitted with the Form GA-V. The G-7 return should be filed once the quarter is complete.
- Do not use this form for nonresident withholding; use Form G-7 NRW.
- Make check or money order payable to: Georgia Department of Revenue
- Mail this completed form with your payment to:
  **Processing Center**
  **Georgia Department of Revenue**
  **PO Box 105482**
  **Atlanta, Georgia 30348-5482**

**PLEASE DO NOT mail this entire page. Please cut along dotted line and mail only voucher and payment.**
**PLEASE DO NOT STAPLE OR PAPER CLIP. PLEASE REMOVE ALL CHECK STUBS.**

Cut on dotted line

**G-7 QUARTERLY RETURN**
FOR **MONTHLY PAYER** (Rev. 05/12/25)

☐ Amended Return

2600604013

**Name and Address:**

| | | | | |
|---|---|---|---|---|
| **Under penalty of perjury, I declare that this return has been examined by me and to the best my of knowledge and belief it is true, correct and complete.** Signature Title | Telephone | GA Withholding ID | FEI Number | Vendor Code **040** |
| | Date | Tax withheld for Month 1 | Tax withheld for Month 2 | Tax withheld for Month 3 |
| **Explanation of Adjustments** | | Adjustment to Tax (+ or -) | Adjustment to Tax (+ or -) | Adjustment to Tax (+ or -) |
| | | **Tax Due** | **Tax Due** | **Tax Due** |
| | | **Tax Paid** | **Tax Paid** | **Tax Paid** |
| | | Period Ending | Due Date | Quarterly Total |

PROCESSING CENTER
GEORGIA DEPARTMENT OF REVENUE
PO BOX 105482
ATLANTA GA 30348-5482

**PLEASE DO NOT STAPLE OR PAPER CLIP. REMOVE ALL CHECK STUBS.**

**Amount Paid** $

0061000000000000004000000000001