



Beer Tax Return (and Similar Fermented Malt Beverages) Tax Law - Article 18

Monthly filers: File each month on or before the 20th day of the next month. Do not use this form for periods prior to January 1, 2013. Annual filers: File each calendar year on or before the 20th day of the following January. Do not use this form for periods prior to January 2013. Enter legal name and address if not preprinted. Business telephone number. Nature of business. Beer tax registration number. Federal EIN or social security number. State Liquor Authority (SLA) license number.

Inventories and purchases table with 7 rows and 2 columns. Report in whole gallons only.

Computation of taxable gallons of beer - New York State table with 15 rows and 2 columns.

Computation of tax table with columns for New York State, New York City, and Total. Rows 16-23.

24 Payment - Make check or money order payable to: Commissioner of Taxation and Finance. Write on your check Form MT-50, your identification number, and the period you are reporting.

Certification. I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete.

Signature lines for Date, Authorized signature, Official title, Signature of individual or name of firm preparing this return, Preparer's address.

Attach an explanation for any entries made on lines 8 and 19 and copies of Forms MT-51 (in duplicate), MT-52, and MT-53, if applicable. Attach a copy of your microbrewery, restaurant brewer, or farm brewer SLA license if filing an annual return. Keep a completed copy of the return and all attachments for your records.

Schedule A – Tax-Free Purchases

Purchases on which New York State alcoholic beverages tax **was not** paid

Name of seller	Registration number or federal EIN	Address of seller	Name of brewer or manufacturer of beer	Gallons purchased during period

Total (enter here and on line 3 on front)				
Purchases in transit (do not include in total)				

Schedule B – Tax-Paid Purchases

Purchases on which New York State alcoholic beverages tax **was** paid

Name of seller	Registration number or federal EIN	Address of seller	Name of brewer or manufacturer of beer	Gallons purchased during period

Total (enter here and on line 3 on front)				
Purchases in transit (do not include in total)				

Attach additional sheets if necessary.