



Alcoholic Beverages Tax Return

Monthly filers: File each month on or before the 20th day of the following month. Annual filers: File each calendar year on or before January 20th of the following year. Taxpayer identification number, Business telephone number, Legal name, Mailing address, City, State, ZIP code, Mark an X in the applicable box: Cancel registration: [] Abbreviated annual return, [] Liquor/Wine, [] Amended return, [] Beer, [] Final return, [] Cider

If you need to update your address or phone information, you can do so online. See Change of business information in the instructions.

Out-of-state direct wine shippers and noncommercial importers: Before completing this return, see instructions.

Inventories and purchases table with columns A (Liquor and wine containing more than 24% alcohol by volume), B (Liquor containing more than 2%, but not more than 24% ABV), C (Wine 24% ABV or less), D (Beer), and E (Cider). Rows include Amount on hand at beginning of period, Purchases, Amount produced, Subtotal, Purchases used for production, Amount on hand at end of period, Add lines 5 and 6, and Amount to be accounted for.

Computation of tax – New York State and New York City

Computation of tax table with rows 9-19. Row 15 shows tax rates: 1.70 for A, .67 for B, .30 for C, .14 for D, .0379 for E. Rows 18a and 18b show NYC tax calculations for liquor and beer.

Payment of tax

Payment of tax table with rows 20-24. Row 20: Total tax due. Row 21: Penalties and interest. Row 22: Total. Row 23: Amount previously paid. Row 24: Balance due.

25 Payment – Make check or money order payable in U.S. funds to: Commissioner of Taxation and Finance. Write on your check Form MT-456, your identification number, and the period you are reporting (see instr.)

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For office use only

Schedule A – Purchases schedule

See Form MT-456-I, *Instructions for Forms MT-456 and MT-456-ATT*, before completing this schedule. Attach additional sheets as necessary. For *Product code*, enter **A** for liquor and wine containing more than 24% ABV. Enter **B** for liquor containing more than 2%, but not more than 24% ABV. Enter **C** for wine (24% or less ABV), **D** for beer, or **E** for cider. You must keep records to support all entries.

Legal name	Taxpayer identification number	Period covered by this return From (mm/dd/yy):	to (mm/dd/yy):
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Legal name and address of supplier (city/state)	EIN of supplier	Product code (see above)	Tax-paid purchases (liters/gallons)	Nontaxable purchases (liters/gallons)

Totals of tax-paid and nontaxable purchases for each product code

For each product code listed above, total the amounts and enter the result below and in the appropriate column (columns A through E) on page 1. For *Total tax-paid purchases* transfer to line 10 and for *Total purchases*, transfer to line 2.

Product codes	Total tax-paid purchases	Total nontaxable purchases	Total purchases (total tax paid purchases + total nontaxable purchases)
Total of product code A (enter here and in column A)			
Total of product code B (enter here and in column B)			
Total of product code C (enter here and in column C)			
Total of product code D (enter here and in column D)			
Total of product code E (enter here and in column E)			

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Schedule B – Sales schedule

See Form MT-456-I before completing this schedule. Attach additional sheets as necessary.

For *Product code*, enter **A** for liquor and wine containing more than 24% ABV. Enter **B** for liquor containing more than 2%, but not more than 24% ABV. Enter **C** for wine (24% or less ABV), **D** for beer, or **E** for cider. You must keep records to support all entries.

Legal name	Taxpayer identification number	Period covered by this return	
		From (mm/dd/yy):	to (mm/dd/yy):

Legal name and delivery address of customer <i>(city/state)</i>	EIN of customer	Product code <i>(see above)</i>	Nontaxable sales and uses <i>(liters/gallons)</i>	Out-of-state sales <i>(liters/gallons)</i>

Totals of nontaxable sales and uses and out-of-state sales for each product code

For each product code listed above, total the amounts and enter the result below and in the appropriate column (columns A through E) on page 1. For *Total nontaxable sales and uses* transfer to line 11 and for *Total out-of-state sales*, transfer to line 12.

Product codes	Total nontaxable sales and uses	Total out-of-state sales
Total of product code A <i>(enter here and in column A)</i>		
Total of product code B <i>(enter here and in column B)</i>		
Total of product code C <i>(enter here and in column C)</i>		
Total of product code D <i>(enter here and in column D)</i>		
Total of product code E <i>(enter here and in column E)</i>		

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Third – party designee <i>(see instructions)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Designee's name <i>(print)</i>	Designee's phone number ()
	Designee's email address		PIN

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

Authorized person	Printed name of authorized person	Signature of authorized person	Official title	
	Email address of authorized person		Telephone number	Date
Paid preparer use only <i>(see instr.)</i>	Firm's name <i>(or yours if self-employed)</i>		Firm's EIN	Preparer's PTIN or SSN
	Signature of individual preparing this return	Address	City	State ZIP code
	Email address of individual preparing this return		Preparer's NYTPRIN or	Excl. code

See instructions for where to file.

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