

Department of Taxation and Finance

## Cider Tax Return

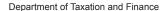
Tax Law - Article 18

Period covered by this return You must file for each calendar year on or before the 20th day of the following January. Calendar year: Keep a copy for your records. Read instructions (Form MT-60-I) carefully. Legal name and address (see instructions) Business telephone number Change in business information - If your name, employer identification Nature of business number, address, or owner/officer information ☐ Manufacturer ☐ Importer has changed, you must file □ No business this year Form DTF-95. If only your address has changed, you ☐ Cancel registration may file Form DTF-96. You ☐ Amended return can get these forms from our Cider tax registration number Employer identification number or social security number SLA license number website, or by phone. See Need help? in the instructions Inventories and purchases Report amounts in whole gallons 1 Gallons on hand at the beginning of the year ...... 2 2 Gallons produced during the year..... 3 Gallons purchased during the year: a Tax-free purchases (from Schedule A on back) ....... 3a **b** Tax-paid purchases (from Schedule B on back) ............ 3b Total gallons purchased during the year (add lines 3a and 3b)..... 3 4 Total (add lines 1, 2, and 3) ..... 4 5 Gallons on hand at the end of the year..... 6 Gallons to be accounted for (subtract line 5 from line 4) 6 Computation of taxable gallons of cider 7 Loss and waste (explain on separate sheet) 8 Purchases on which the alcoholic beverages tax was included in the purchase price (from Schedule B on back) ..... 8 9 Sales made to customers inside New York State without collecting the alcoholic beverages tax (from Schedule D on back) 10 Sales to customers outside New York State (from Form MT-61, Cider Schedule C - Out-of-State Sales) 10 Total deductions (add lines 7 through 10) 11 12 Net gallons taxable (subtract line 11 from line 6) ..... Computation and payment of tax 13 13 Tax on cider (multiply line 12 by \$.0379 per gallon) 14 Adjustments from prior returns (enter any subtraction using a minus (-) sign; explain on separate sheet) 14 15 Penalties (see instructions) 15 16 Interest (see instructions) 16 17 Amount due (add lines 13, 15, and 16 and add or subtract line 14; see instructions) ...... 17 18 Payment - Make check or money order payable in U.S. funds to Commissioner of Taxation and Finance. Payment enclosed Write on your check Form MT-60, your identification number, and the year you are reporting ... 18 Certification. I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete. Date Authorized signature Official title Date Signature of individual preparing this return Preparer's address Attach your remittance, an explanation for lines 7 and 14, and two completed For office use only copies of Form MT-61, for each state's schedule, if applicable. Mail to: NYS ALCOHOLIC BEVERAGES TAX-PROCESSING PO BOX 15196

If you are sending your return by a delivery service other than the U.S. Postal Service, do not use the address above (see instructions).

**ALBANY NY 12212-5196** 

Purchase		- Tax-free purchases tate alcoholic beverages tax was not paid	
Name of seller	Registration number or employer ID number	Address of seller	Gallons
		Total (enter here and on line 3a on front)	
Purchases in transit (do not include in total) .			
Purcha		- Tax-paid purchases State alcoholic beverages tax was paid	
Name of seller	Registration number or employer ID number	Address of seller	Gallons
Total (enter here and on lines 3b and 8 on front)			
Note: Report tax-fi	ree, out-of-state sales	on Form MT-61, Schedule C – Out-of-State Sales.	
Sales on which New York State		D – Tax-free sales x was not paid (enter only tax-free sales inside New York	State)
Name of purchaser	Registration number or employer ID number	Address of purchaser	Gallons
Total (enter here and on line 9 on front)			
Sales in transit (do not include in total)			





# **Change in Mailing Address for Alcoholic Beverage Tax Returns**

TP-32.4

7/18

The mailing address changed for all alcoholic beverage tax returns. The mailing address is (see *Private delivery services* below):

NYS TAX DEPARTMENT ABT PROCESSING PO BOX 15196 ALBANY NY 12212-5196

**Note:** Forms mailed to old addresses may be delayed in processing.

#### Private delivery services

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to mail in your form and tax payment. However, if, at a later date, you need to establish the date you filed or paid your tax, you cannot use the date recorded by a private delivery service unless you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, Designated Private Delivery Services. See Need help? for information on obtaining forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your form, contact that private delivery service for instructions on how to obtain written proof of the date your form was given to the delivery service for delivery.

If you are using a private delivery service, send to:

NYS TAX DEPARTMENT RPC – MISC TAX 90 COHOES AVE GREEN ISLAND NY 12183

### Need help?



Visit our website at www.tax.ny.gov

- · get information and manage your taxes online
- · check for new online services and features

#### Telephone assistance

Miscellaneous Tax Information Center: 518-457-5735

To order forms and publications: 518-457-5431

Text Telephone (TTY) or TDD Dial 7-1-1 for the equipment users Dial 7-1-1 for the New York Relay Service