



Department of Taxation
P.O. Box 530
Columbus, OH 43216-0530

ALC 36
Rev. 11/07

Ohio Wine and Mixed Beverage Tax Return

Reporting period for the month of _____ 20 _____

Return is due on or before the 18th day of the month following the reporting period.

Account number _____

Name _____

Address _____

City _____ State _____ ZIP _____

For Department of Taxation Use Only

Report in Gallons and Fractions Thereof

	A 14% or Less	B >14-21%	C Vermouth	D Mixed Bev. 21%-Less	E Sparkling	F Cider 6% or Less
1. Bottled beverage received tax not paid (Schedule A)						
2. Bottled beverage removed from U.S. Customs bonded warehouse						
3. Beverage removed from bonded wine cellar						
4. Mixed beverage bottled and sold in Ohio (A-4 permit holders only)						
5. Total of Lines 1, 2, 3 and 4.						
6. Sales for sacramental purposes by B-3 liquor permit holders only (Schedule B)						
7. Sales in interstate commerce (Schedule C)						
8. Sales to authorized agencies of the U.S. government (Schedule B)						
9. Total exempt sales (total of lines 6, 7 and 8)						
10. Taxable gallons (line 5 minus line 9)						
Tax Rate	.30	.98	1.08	1.20	1.48	.24
11. Multiply totals on line 10 by tax rate	\$	\$	\$	\$	\$	\$
12. Tax liability (total amounts shown on line 11, columns A, B, C, D, E and F)						\$
13. Additional tax (2¢ per gallon reported on line 10, columns A, B, C and E – do not include columns D or F) – boxes used for additional tax are highlighted	Gallons				X .02	\$
14. Ohio wine exempt sales	Gallons				X .02	\$
15. Subtotal (line 12 plus line 13 minus line 14)						\$
16. Discount, if applicable (3% of amount shown on line 15)						\$
17. Total tax to be paid with this return (line 15 minus line 16)						\$

I declare under penalties of perjury that this return, including any accompanying schedules and statements, has been examined by me and, to the best of my knowledge and belief, is a true, correct and complete return and report.

Make check or money order payable to the Treasurer of State of Ohio and mail to Ohio Department of Taxation, P.O. Box 530, Columbus, OH 43216-0530. This return and payment must be **received** on or before the 18th day of the month following this reporting period.

Date Authorized signature

Telephone

If you have any questions regarding the Ohio Wine and Mixed Beverage Tax Return, please contact the Excise Tax Section at (855) 466-3921.

