



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

Ohio Wine and Mixed Beverage Tax Return for A-2, B-2a, S-1, and/or S-2 Permit Holders

ALC 37
Rev. 9/21

Reporting period _____ 20 _____

Account number _____ FEIN _____

Name _____

Address _____

City _____ State _____ ZIP _____

For Department of Taxation Use Only

1. Taxable gallons of wine (from applicable schedule below)	
2. Tax due on wine (line 1 multiplied by \$0.02)	\$
STOP – If you are an out-of-state B-2a, S-1 and/or S-2 permit holder – do NOT complete lines 3 and 4; proceed to line 5.	
3. Taxable gallons of cider (from Schedule for In-State Wineries below, line 8). Enter <u>only</u> if production of cider everywhere from line 8 is >500,000	
4. Tax due on cider (line 3 multiplied by \$0.24)	\$
5. Tax subtotal (total of lines 2 and 4)	\$
6. Discount, if applicable (line 5 multiplied by 3%)	\$
7. Total tax due (line 5 minus line 6)	\$
8. Total production of cider everywhere for calendar year in gallons	
9. Total production of wine everywhere for calendar year in gallons	

Schedule for In-State Wineries	A	B	C	D	E
Report in Gallons and Fractions Thereof	4% to 14%	>14% to 21%	Vermouth	Sparkling	Cider
1. Beverage removed from bond					
2. Sales for sacramental purposes by B3 liquor permit holders only					
3. Sales in interstate commerce (complete Schedule C)					
4. Sales to authorized agencies of the U.S. government					
5. Total exempt sales (total of lines 2, 3, and 4)					
6. Taxable gallons per type (line 1 minus line 5)					
7. Total taxable gallons of wine (total of lines 6A, 6B, 6C, and 6D)					
8. Total taxable gallons of cider (line 6E)					

Schedule for Out-of-State Wineries	A	B	C	D
Report in Gallons and Fractions Thereof	4% to 14%	>14% to 21%	Vermouth	Sparkling
1. Sales made to Ohio retailers or consumers				
2. Total taxable gallons of wine (total of lines 1 A, B, C and D)				

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

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.

Signature _____ Date _____