



MT-70-MN Alcoholic Beverages Floor Tax Return - Beer and Wine

05050000000500-AN00

| |
|-----------------------------|
| Name |
| Number and street or PO box |
| City, state, ZIP code |

Sales tax ID number

Due date

7/20/2009

Important: Failure to file this return and pay the alcoholic beverages floor tax due will result in the imposition of civil penalties and interest under Article 18 of the New York State Tax Law and may result in criminal penalties under Article 37 of the Tax Law.

| | |
|--|--------------------|
| Employer identification number or social security number | SLA license number |
|--|--------------------|

Read the instructions (Form MT-70-I) before filling out this return.

Payment: Make your check or money order payable in U.S. funds to:
Commissioner of Taxation and Finance

Write your taxpayer ID number and **ABT Floor Tax** on your check or money order.

Enter payment amount

| | | |
|----------------------|---|----------------------|
| <input type="text"/> | • | <input type="text"/> |
|----------------------|---|----------------------|

To be filed by all manufacturers, distributors, wholesalers, retailers, and other sellers that have beer or wine in their possession or under their control for purposes of sale in New York State on **May 1, 2009**. This return must be filed on or before **July 20, 2009**. **Keep a copy for audit purposes for at least three years.** Effective May 1, 2009, the New York State excise tax on beer increased from 11¢ to 14¢ per gallon; the excise tax on wine increased from 18.93¢ to 30¢ per gallon.

Nature of business activity

Manufacturer
 Distributor
 Wholesaler
 Retailer
 Other (describe): _____

Floor tax computation

| | A Gallons | B Floor tax rate | C Amount due (A x B) |
|--|-------------------------|---------------------|-------------------------|
| 1. Beer inventory | 1. <input type="text"/> | x \$ 0.03 = | <input type="text"/> |
| 2. Wine inventory | 2. <input type="text"/> | x \$ 0.1107 = | <input type="text"/> |
| 3. Tax due (add lines 1 and 2) | 3. | | <input type="text"/> |
| 4. Penalty if filed after July 20, 2009 (see instructions) | 4. | | <input type="text"/> |
| 5. Interest if filed after July 20, 2009 (see instructions) | 5. | | <input type="text"/> |
| 6. Total amount due (add lines 3 through 5). Pay this amount | 6. | | <input type="text"/> |

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

| | | | |
|---------------|-----------|----------------|-------------------------|
| Date | Signature | Official title | Telephone number () |
| Email address | | | |

See mailing instructions on back of return

For more information, visit our Web site at www.nystax.gov

For office use only

Mailing instructions

1. Attach check or money order, payable in U.S. funds, to **Commissioner of Taxation and Finance**.
2. Include on your check or money order your taxpayer ID number and **ABT Floor Tax**.
3. Mail to: NYS Tax Department, ABT Floor Tax, PO Box 22025, Albany NY 12201-2025.
See the instructions if you wish to use a private delivery service.