



**Department of
Taxation**

P.O. Box 530
Columbus, OH 43216-0530

ALC 83
Rev. 9/21

Ohio Beer and Malt Beverage Tax Return

Reporting period _____ 20_____

Account number _____ FEIN _____

Name _____

Address _____

City _____ State _____ ZIP _____

**Return is due on or before the 10th day of
the month following the reporting period.**

For Department of Taxation
Use Only

1. Total beer and malt beverage production everywhere in gallons				
2. Schedule A line 3	\$			
3. Schedules B and B1 line 4	\$			
4. Total beer and malt beverage tax liability (total of lines 2 and 3)			\$	
5. Monthly advance tax payment received by the Ohio Department of Taxation on or before 18th day of report period			\$	
6. If line 4 exceeds line 5, enter difference here			\$	
7. If line 4 exceeds line 5, enter line 5 multiplied by 10%	\$			
8. Discount (enter the lesser of line 6 or 7 multiplied by 3%)	\$			
9. If line 5 exceeds line 4, enter difference here	\$			
10. Monthly advance tax payment received by the Ohio Department of Taxation between the 19th and the last day of the report period	\$			
11. Credit balance, if any, from previous return	\$			
12. Additional credit (line 5 multiplied by 3%)	\$			
13. Total of lines 8, 9, 10, 11 and 12			\$	
14. Tax due, if any (if line 6 exceeds line 13, enter difference here or line 4 if no advance payment was made)			\$	
15. Credit balance, if any (if line 13 exceeds line 6 enter difference here and carry forward to line 11 of next return)	\$			

Complete lines 5
through 13 **only** if you
made an advance
payment.

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.

Authorized signature _____

Date _____

Telephone _____

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 10th day of the month following this reporting period.

Schedule A
Beer and Malt Beverages in Barrels

Schedule A – Barrel Beer and Malt Beverages		Number of Barrels and Sizes				
		1/4	1/2	1	13.2 Gal. Keg	4-5L Case
1. Sold in Ohio and/or consumed on premises in Ohio						
	Tax rate	\$ 1.395	\$ 2.79	\$ 5.58	\$ 2.376	\$.951
2. Multiply totals on line 1 by tax rate		\$	\$	\$	\$	\$
3. Tax liability (total of amounts on line 2) – insert here and on line 2 of page 1						\$

Schedules B and B1
Beer and Malt Beverages in Containers Other Than Barrels

Schedule B – Case Beer and Malt Beverages		Number of Cases and Sizes				
		24/12	12/32	12/40	24/7	12/12
1. Sold in Ohio and/or consumed on premises in Ohio						
	Tax rate	\$.403	\$.605	\$.706	\$.235	\$.202
2. Multiply totals on line 1 by tax rate		\$	\$	\$	\$	\$
3. Tax liability (total of amounts on line 2)						\$

Schedule B1 – Case Beer and Malt Beverages		Number of Cases and Sizes				
		24/12	12/32	12/40	24/7	12/12
1. Sold in Ohio and/or shipped to a personal consumer in Ohio						
	Tax rate	\$.403	\$.605	\$.706	\$.235	\$.202
2. Multiply totals on line 1 by tax rate		\$	\$	\$	\$	\$
3. Tax liability (total of amounts on line 2)						\$
4. Total tax liability (add Schedule B line 3 and Schedule B1 line 3) - insert here and on line 3 of page 1						\$