Department of Revenue Services Excise Taxes Unit 450 Columbus Blvd Ste 1 Hartford CT 06103-1837 (Rev. 02/17)

Form S & BT

Alcoholic Beverages Tax

Payment of Taxes Due on the Importation of Alcoholic Beverages

	For DRS use only							
	Date Received							
		Check here if BT-100 is attached.						
•		Check here if BT-101 is attached.						

Purpose: Use this form to report and pay Connecticut use tax and Connecticut alcoholic beverages tax on alcoholic beverages you have brought into Connecticut that you purchased or were given outside of Connecticut or on alcoholic beverages that you are having shipped into Connecticut. For more information on the importation of alcoholic beverages into Connecticut, see **Informational Publication 2017(17)**, *Bringing or Importing Alcoholic Beverages into Connecticut.*

Name _			Social Se	curity Number ►					
Address	·		()						
Number and street			Telephone nu						
Date of	City/Town	State	older to bring	ZIP code	rages into Connecticut				
Date of birth You must be 21 years of age or older to bring or import alcoholic beverages into Connecticut.									
You must complete Schedule A on the reverse side of this form in order to compute the total amount of tax due.									
A Type of Alcoholic Beverage		B No. of Gallons	C Tax Rate	D Alcoholic Beverage Tax	E Purchase Price				
1. Bee	er and malt beverages	>	X \$.24	▶ \$	▶\$				
2. Dist	illed liquor	>	X \$5.40	> \$	▶\$				
3. Still	wines not in excess of 21%	>	X \$.72	▶ \$	▶\$				
4. Still	wines over 21% & sparkling wines	>	X \$1.80	▶ \$	▶\$				
5. Liqu	or cooler not over 7% alcohol	>	X \$2.46	▶ \$	▶\$				
6. Tota	als			▶ \$	> \$				
7. Amo	ount subject to use tax: Add totals form Line	e 6, Column D and	l Column E.		▶\$				
8. Use	▶\$								
9. Sales or use tax paid to other jurisdictions, if any: Enter total from Schedule A, Column E.					▶\$				
10. Use	▶\$								
11. Total Amount Due: Add Line 10 and the amount entered in Line 6, Column D.					▶\$				
he Excis Make ce Mail to: [red additional information or assistance regions are Taxes Unit at 860-541-3224, Monday through the rtified check payable to Commissioner of Department of Revenue Services, State of the under penalty of law that I have examined the services and the services are services.	ough Friday, 8:30 Revenue Service Connecticut, Excis	a.m. to 4:30 p es. se Taxes Unit,	.m. 450 Columbus Blvd Ste	1, Hartford CT 06103-1837				
my know of Rever	reledge and belief, it is true, complete, and concern Services (DRS) is a fine of not more the parer other than the taxpayer is based on a	orrect. I understan nan \$5,000, impris	d the penalty for no	or willfully delivering a fa t more than five years, o	lse return to the Departmer				
Taxpaye	r signature	Title		Date					
Print tax	payer name	Telephone r	number	Taxpayer SSN					
Paid pre	parer signature	Preparer's	address		Preparer's SSN or PTIN				
		For DRS U	lse Only						
Reviewed by: Approved:									

General Instructions

Use this form to report and pay Connecticut use tax and Connecticut alcoholic beverage tax on alcoholic beverages you:

- Brought into Connecticut that you purchased or were given outside of Connecticut; or
- Are having shipped into Connecticut that you purchased or were given outside of Connecticut.

For more information on the importation of alcoholic beverages into Connecticut, see Informational Publication 2017(17), Bringing or Importing Alcoholic Beverages Into Connecticut. You must complete this form and file it with the Department of Revenue Services (DRS) at the address on the front, together with either Form BT-100, Application for Permission to Import Alcoholic Beverages From Within the United States for Personal Consumption, or Form BT-101, Application for Permission to Import Alcoholic Beverages From Outside the United States for Personal Consumption, to import alcoholic beverages into Connecticut.

Instructions for Completing Form S&BT

- You must complete **Schedule A** (below) first in order to complete the total amount of tax due on the front of this form.
- On the front of this form, Lines 1 through 5, Column E, enter the amount you paid for the untaxed alcoholic beverages including shipping and handling charges.
- If you paid sales or use tax to another jurisdiction on your purchase of untaxed alcoholic beverages, enter on Line 8 on the front of this form the amount of sales or use tax paid to the other jurisdiction as long as the invoice or slip shows the amount of tax paid to the other jurisdiction.
- You must attach an original or a photocopy of the invoice or numbered slip issued at the time of purchase to this form.

Schedule A

А	В	С	D	E
Quantity	Description of Alcoholic Beverage Imported Enter brand name and type.	Date of Purchase	Purchase Price Include shipping and handling charges.	Sales or Use Tax Paid Enter amount and jurisdiction to which paid.
	21		0 0	
Total: This amount should agree with Line 6, Column E, on the front of this			\$	
Total: Enter this amount in Line 9, Column E, on the front of this form.				\$