

**MARYLAND  
FORM  
532** **FAMILY BEER AND WINE  
FACILITY PERMIT REPORT**



195320049

**AMENDED RETURN**

Name		Permit Number <b>FP-</b>	
Mailing Address			
City		State	Zip Code +4
E-mail Address		Period End Date MM/YYYY	

**BEER**

**GALLONS**

- 1. Produced by individuals during month . . . . . \_\_\_\_\_
- 2. Samples produced. . . . . \_\_\_\_\_
- 3. Produced for testing equipment, recipes, etc. . . . . \_\_\_\_\_
- 4. Total beer produced. . . . . \_\_\_\_\_

**WINE**

- 5. Produced by individuals during month . . . . . \_\_\_\_\_
- 6. Samples produced during month . . . . . \_\_\_\_\_
- 7. Produced for testing equipment, recipes, etc.. . . . . \_\_\_\_\_
- 8. Total wine produced . . . . . \_\_\_\_\_

**AFFIDAVIT**

I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing document are true and correct to the best of my knowledge, information and belief.

\_\_\_\_\_  
Signature of permit holder

\_\_\_\_\_  
Title: Owner, Partner or Officer

\_\_\_\_\_  
Type or print name of permit holder

\_\_\_\_\_  
Date

**MARYLAND  
FORM  
532**     **FAMILY BEER AND WINE  
FACILITY PERMIT REPORT  
INSTRUCTIONS**

This report, together with form COM/RAD 532-1, shall be filed and physically received by Alcohol Tax Office no later than October 15th following the report year which it covers.

Insert in the space provided the entity name and your permit number.

Indicate the report year the report covers.

**LINE    INSTRUCTION**

- 1     Indicate beer produced by individuals from line 20 of the Detail Report COM/RAD 532-1 designated "Beer."
- 2     Indicate beer produced for sampling from line 20 of the Detail Report COM/RAD 532-1 designated "Beer Samples."
- 3     Indicate beer produced for testing equipment and recipes.
- 4     Add lines 1, 2 and 3 of 532 Report for grand total beer produced. Enter on line 4 of 532 Report.
- 5     Indicate wine produced by individuals from line 20 of the Detail Report COM/RAD 532-1 designated "Wine."
- 6     Indicate wine produced for sampling from line 20 of the Detail Report COM/RAD 532-1 designated "Wine Samples."
- 7     Indicate wine produced for testing equipment and recipes.
- 8     Add lines 5, 6 and 7 of 532 Report for grand total wine produced. Enter on line 8 of 532 Report.

Complete form by having an officer of the company sign and date the report.

Mail tax return to:

Comptroller of Maryland  
Revenue Administration Division  
Returns Processing  
Alcohol Tax Office  
PO Box 2999  
Annapolis, MD. 21404-2999  
Telephone: 410-260-7127 or 800-638-2937  
Fax: 410-260-7924

**[www.marylandtaxes.gov](http://www.marylandtaxes.gov)**