	Form Approva	il: OMB No. 1512-0095 (09/30/98)
DEPARTMENT OF THE TR		1. FORMULA NUMBER
BUREAU OF ALCOHOL, TOBACCO		
FORMULA AND PROCESS FOR NONBEVERAGE PRODUCT (See Instructions on tearoff - Prepare in triplicate, except as indicated.)		O KIND (a.e. Alashal Dum) 9
	4. CHECK IF 5. NUMBER OF DAYS	2. KIND (e.g. Alcohol, Rum) & PROOF OF SPIRITS ON WHICH
3. NAME OF PRODUCT.	SAMPLE WILL TO COMPLETE	DRAWBACK WILL BE CLAIMED.
	BE SUBMITTED. PROCESS.	
6. NAME OF MANUFACTURER & ADDRESS WHERE PRODUCT WI	LL BE 7. CHECK KIND OF PRODUCT:	8. FORMULAS SUPERSEDED.
PRODUCED (If multiple production sites, list other addresses on re		6. TONMOLASSOF ENSEDED.
	FLAVOR/FLAVORING EXTRACT	
	FOOD PRODUCT PERFUME	
	9. ELIGIBLE ABSOLUTE ALCOHOL BY	10. ALCOHOL CONTENT BY VOLUME
	VOLUME USED. (See instructions)	OF FINISHED PRODUCT.
	0/	
	%	_%
11. IF MADE WITH RECOVERED SPIRITS: 12. IF FINISHED PRODUCT IS	S TO BE USED IN ALCOHOLIC BEVERAGES:	
FI IOIDI E DI LIO DEGOVEDED ADOG	I NATURAL FLAVORING? (YES OR NO)	
LUTE ALCOHOL BY VOLUME USED. B. DOES PRODUCT CONTAIN	GREATER THAN 0.1% ARTIFICIAL FLAVORING (Exclud	ing Vanillin, Ethyl Vanillin, Maltol, and
(See instructions) Ethyl Maltol)? (YES OR NO)	
	N IN PRODUCT OF: SYNTHETIC VANILLIN	ETHYL VANILLIN
SYNTHETIC MALTOL % D. DOES PRODUCT CONTAIN	ETHYL MALTOL IF YES, WHICH? _	
E. ARE ALL INGREDIENTS AF	PROVED BY FDA FOR USE WITHOUT LIMITATION OR F	RESTRICTION? (YES OR NO)
13. FORMULA AND PROCESS (Use Additional Space on Reverse if N		<u></u>
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14. CONTACT PERSON (Include Area Code & 15. SIGNATURE	& TITLE OF APPLICANT OR AUTHORIZED AGE	NT. 16. DATE.
Phone No.)	w ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
,		
ADDUCANT, DUCACE M	AKE NO ENTRY BELOW THIS LINE.	
	ARE NO ENTRY BELOW THIS LINE.	
17. LABORATORY SAMPLE NUMBER. 18. ACTION.		
19. ALCOHOL BY VOLUME.		
%		
20. ANALYST.		
21. DATE.		
ATF F 5154.1 (6-96) (Formerly ATF F 678 (5530.5)) PREVIOUS EDIT	IONS ARE OBSOLETE	

22.	SPACE FOR CONTINUATION (PI	lease indicate item number(s)	being continued.)	
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INSTRUCTIONS FOR ATF F 5154.1 (Formerly ATF F 1678)

- A. Before filling out this form, read carefully Subpart F of Part 17, Title 27, Code of Federal Regulations. Submit a separate formula for each non-beverage product made with taxpaid distilled spirits on which drawback is claimed (except current U.S.P., N.F., and H.P.U.S. preparations for which quantitative formulas are not required).
- B. This form must be filed within 6 months after the end of the quarter in which distilled spirits were first used to manufacture the product for drawback. Submit to: Alcohol & Tobacco Laboratory (Attn: Drawback), 1401 Research Blvd., Rockville, MD 20850. Submit in triplicate; however, if the product will be manufactured at more than one location, submit two additional copies for each additional location.
- C. ITEM 1. Formula numbers begin with number "1" for the first submission and progress sequentially with future submissions. For numbering when formulas will be used at more than one plant, see 27 CFR 17.121(c).
- D. ITEM 2. Include intermediate products (see 27 CFR 17.154).
- E. ITEM 3. The name must reflect the type of product. For example, a "natural peach flavor" should contain all natural ingredients as well as real peach. If it does not contain peach, it could be called "natural peach type flavor."
- F. ITEM 4. Submission of samples is voluntary, unless specifically required under 27 CFR 17.124. If it is known that a sample will be submitted, either with the formula or under separate cover, please check the box.
- G. ITEM 5. State the number of days it takes to manufacture the product. If it takes only a few hours to mix it, but takes an additional day to filter it, that should be noted.
- H. ITEM 6. State the manufacturing location. If you wish the form to be returned to another address, enclose an addressed, stamped envelope.
- I. ITEM 7. Indicate the type of product. Cough syrups and cold relief products are considered medicine/medicinal preparations. Cakes and similar products are considered to be food products, while products such as lemon extracts are considered flavors. Submit commercial labels or facsimiles and any available supporting data for bitters (flavoring or medicinal) and for any other product that cannot be readily classified in the product types listed.
- J. ITEM 8. State the number(s) of any formulas to be replaced by the current submission. If formula(s) being superseded have been approved for use at plant(s) other than the one in item 8, specify such plant(s).
- K. ITEM 9: Divide the number of proof gallons of eligible alcohol used in manufacturing and standardizing the product by twice the yield of finished product (in wine gallons). Multiply the result by 100. For example, if 32 proof gallons are used to make 100 gallons of product, "16 %" would be entered in item 9. If the finished product is not a liquid, express as "proof gallons per batch." Eligible alcohol includes alcohol contained in intermediate products (as defined in 27 CFR 17.11) but NOT alcohol contained in nonbeverage products, being used as ingredients, on which drawback may be claimed separately. If a range is stated, include the reason(s) for variation (item 22 may be used for this).
- L. ITEM 10. State the actual percentage of absolute alcohol by volume in the finished product. Include all alcohol, both eligible and ineligible. This is the percentage of alcohol that would be found by analysis. If the product is not a liquid, state the proof gals. of alcohol remaining in a given quantity (by weight) of finished product.

- M. ITEM 11. Answer only if recovered alcohol will be used. Add the quantities, in proof gals., of all eligible spirits used (including eligible spirits recovered from intermediate products) AND all ineligible recovered spirits used; then divide by twice the yield of finished product (wine gals.), and multiply the result by 100. A range may be stated. If the finished product is not a liquid, express as "proof gallons per batch."
- N. ITEM 12. Answer only if product is for use in alcoholic beverages. Definitions of "natural" and "artificial" are found in FDA regulations, 21 CFR 101.22. "Color additive" is defined in FDA regulations, 21 CFR 70.3. If the answer to question E is "No," limited or restricted ingredients must be noted as such in item 13, including quantity used.
- O. ITEM 13. List the name, quantity, and alcohol content, if any (by volume), of each ingredient used. Either metric or English measure may be used. Usage of ingredients containing alcohol and the yield of liquid products must be expressed in wine gals. Include proof gallons of eligible spirits and recovered spirits used. Give the product name and ATF formula no. (from ATF Form 5154.1 or 1678) of alcoholic ingredients if self-manufactured. If purchased, give the manufacturer's name, the name of the product, and the ATF formula number, if known. Example:

NATURAL AND ARTIFICIAL VANILLA FLAVOR:

Vanilla Extract 10 Fold (35% alcohol, purchased from X Company, Formula No. 102)	473 ml (.125 wine gal.)
Vanilla Flavor 2 Fold (30% alcohol, our drawback	
Formula No. 422)	1892 ml (.5 wine gal.)
Vanillin	30 g.
Alcohol - 190 proof (Eligible for drawback)	
Water Q.S. to	3785 ml (1 wine gal.)

If additional spirits may need to be added for standardization after all the ingredients called for by the formula have been mixed together, please so state. Identify any colors by their official FDA designations (e.g. caramel, FD&C Yellow No. 5). Describe the manufacturing process (i.e. simple mixture, maceration, percolation, etc.). Show the approximate loss of spirits, if any, during processing (i.e. filtration, evaporation, etc.), and indicate what quantity of alcohol, if any, is recovered. If the manufacturing process involves separate stages, fully describe them and indicate the alcohol content (as a percent by volume) at the end of each stage. If item 9 and/or 11 is expressed as "p.g./batch" (nonliquid products), item 13 must show the standard batch size. Formulas for preserved fruits and alcoholic candies must be accompanied by a sample.

- P. ITEM 15. The applicant or his authorized agent must sign in the space provided and indicate the capacity in which he is signing (e.g. sole proprietor, attorney-in-fact, etc.)
- Q. Supplies of ATF F 5154.1 may be obtained from the ATF Distribution Center, P.O. Box 5950, Springfield, Virginia 22150-5950. Telephone number: (703) 455-7801.

PAPERWORK REDUCTION ACT NOTICE

This request is in accordance with the Paperwork Reduction Act of 1995. This form is used by ATF to determine if the product is nonbeverage in character so that the manufacturer may file for drawback of taxes. The information is required to obtain a benefit.

The estimated burden associated with this collection of information is 30 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be addressed to Reports Management Officer, Document Services Branch, Bureau of Alcohol, Tobacco and Firearms, Washington, D.C. 20226.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.