



Quarterly Motor Fuel Inventory Report by Retail Service Stations

For the period September 1, 1986 thru November 30, 1986
(due December 26, 1986)

Do not attach this report to your sales tax return or use it to report taxable sales or to remit sales tax due. This is an information report, not a sales tax return.

Use labeled form and return envelope for filing your return

If incorrect on label, please enter correct information below. Check box to indicate whether address change is for:

- actual business location
- mailing address other than actual business location.

ID Number	
Name	
Number and Street	
City	
State	ZIP

- This information report **must be filed quarterly by every retail vendor purchasing, selling or using motor fuel** (not including diesel motor fuel). This form should be used to report the requested information for all business locations for which you file sales tax returns under the sales tax identification number indicated above. You must file a separate report, Form FT-943, for each location having a separate sales tax identification number.
- **This inventory report must be used to account for motor fuel held at retail service stations and is to be filed in addition to any other inventory report required as a result of your other business activities.**
- Failure to file this report or willfully filling a false report is a misdemeanor.
- This report must be filed within 25 days of the end of the quarter covered by this report.

Please read the instructions for each part before completing the form.

PART I — Business Description

Check the box(es) which describe(s) your **motor fuel** business. You may check more than one box.

1. Service station operator
2. Motor fuel wholesaler or jobber
3. Registered distributor of motor fuel # M — _____

PART II — Inventory Reconciliation

Line 1— Indicate the retail service station inventory, by type of fuel, on hand at the beginning of the quarter being reported. The opening inventory should be the same as the previous quarter's closing inventory *, attach an explanation if these figures do **not** correspond.

Note: Inventory held at locations other than retail service stations should not be included here, but reported on Form FT-945, *Report of Sales Tax Prepayment on Motor Fuel*.

Line 2— Enter the total number of gallons of motor fuel purchased during the quarter or transferred from your non-retail marketing locations to your retail service stations (as reported on Form FT-945, Part I, Line 4).

Line 3— Add lines 1 and 2 to arrive at total motor fuel available for sale.

Line 4— Enter the total gallons of motor fuel sold or used during the quarter, and any kero-jet fuel remaining in inventory on November 30, 1986 upon which the sales tax has been prepaid. Attach a statement as to the number of gallons of kero-jet fuel reported on this line. You can apply for a refund of prepaid sales tax prepaid on the kero-jet fuel by filing Form FT-950, *Application for Refund of Prepaid Sales Tax on Motor Fuel Sold by Retail Service Stations*. (Refer to TSB-M-86(13)S regarding the reclassification of kero-jet fuel.)

Line 5— Subtract line 4 from line 3. The amount entered in line 5 is your closing inventory for the quarter being reported and should also be your opening inventory for the next quarter.

* For the quarterly period beginning 9/1/86, use the closing inventory reported on your Form FT-943 filed for August, 1986.

	Column A Leaded	Column B Unleaded*	Column C Premium**	Column D Total
1. Opening Inventory of Motor Fuel	gal.	gal.	gal.	gal.
2. Additions to inventory (see instruction above)	gal.	gal.	gal.	gal.
3. Motor Fuel Available for Sale (line 1 plus line 2)	gal.	gal.	gal.	gal.
4. Less: Motor Fuel Sold or Used (see instruction above for kero-jet fuel adjustment)	gal.	gal.	gal.	gal.
5. Closing Inventory (line 3 less line 4)	gal.	gal.	gal.	gal.

* Unleaded fuel includes kerosene compounds and propane.

** Premium fuel includes leaded and unleaded premium and aviation gasoline.

PART III — Summary of Motor Fuel Purchases

All filers, **except** those who are motor fuel distributors registered under Article 12-A, must complete this part.

Enter the information requested in Columns A through D for all motor fuel purchased for sale or use within New York State during the quarter.

Column A— Enter the name and identification number of the supplier from whom the fuel was purchased as it appears on the Form FT-935, *Certification of Prepayment of Sales Tax and Payment of Motor Fuel Tax*, or other document given to you certifying that the taxes were paid. **List all suppliers** from whom you purchase motor fuel.

If you are a wholesaler, jobber, etc., and reported a transfer of motor fuel from your non-retail marketing locations to your retail service station in Part I of Form FT-945, *Report of Sales Tax Prepayment on Motor Fuel*, enter "self" in Column A and complete the information requested in Col. C and D for that fuel.

Column B— Enter the street and city address of each supplier listed in Column A.

Column C— Indicate the type of fuel purchased by entering "L" (leaded), "U" (unleaded) or "P" (premium).

Column D— Enter the total number of gallons for each type of fuel purchased during the quarter from that supplier.

Enter the information requested in Columns A through D for those purchases of motor fuel made in New York State.

Col. A Name and ID # of Supplier	Col. B Address of Supplier	Col. C Type of Fuel	Col. D Total Gallons Purchased
(Name)			
(ID#)			

Attach additional sheets if necessary to report all suppliers for the reporting period.

▶

Number of locations — Indicate the number of **retail** locations in New York State at which you make sales of motor fuel and which are covered by this report.

Signature of Owner or Authorized Representative		
Title	Telephone	Date
Signature of Preparer (if other than vendor)	Telephone	Date

**Mail to: NYS Department of Taxation and Finance
 INV Unit P.O. Box 5500
 Albany, NY 12205**