



Report of Sales Tax Prepayment On Motor Fuel/Diesel Motor Fuel

For the period June 1, 1997, through June 30, 1997, only; due July 20, 1997.

Header section with fields for Sales tax vendor identification number, Business telephone number, Daytime telephone number, Legal name, DBA, Street, City, state, ZIP code, and Change of Business Information.

Part I - Computation of Sales Tax Prepayment on Motor Fuel — Registered distributors only

Table for Part I with columns (a) Type of Fuel, (b) Number of Gallons Subject to Tax, (c) Sales Tax Prepayment Per Gallon, and (d) Column (b) x Column (c). Includes rows for Region 1 and Region 2, and summary rows 9-13.

Part II - Computation of Sales Tax Prepayment on Diesel Motor Fuel — Registered distributors only

Table for Part II with columns (a) Number of Gallons Subject to Tax, (b) Sales Tax Prepayment Per Gallon, and (c) Column (a) x Column (b). Includes rows for Region 1 and Region 2, and summary rows 16-23.

— Write on the check or money order: Your identification number, form number FT-945/1045 and the period you are reporting — June 1, 1997, through June 30, 1997. Make the check or money order payable to New York State Sales Tax.

— Do not include the sales tax prepayment reported on this return in any other sales tax return, schedule or report.

Signature of vendor

Signature of vendor fields: Title, Telephone number, Date

Signature of preparer if other than vendor

Signature of preparer if other than vendor fields: Address, Telephone number, Date

For Office Use Only

Part III - Inventory Reconciliation of Motor Fuel (in gallons) — Sellers of motor fuel other than registered distributors only

24	Opening inventory of motor fuel (see instructions)	24	
Adjustments to motor fuel inventory:			
25	Purchased in-state	25	
26	Other gain (or loss) to inventory (see instructions)	26	
27	Net adjustments to inventory (see instructions)	27	
28	Motor fuel available for sale (add lines 24 and 27)	28	
29	Motor fuel sold, used or transferred (see instructions)	29	
30	Closing inventory (subtract line 29 from line 28)	30	

Part IV – Supplemental Information — Sellers of motor fuel other than registered distributors only

If you are not a registered distributor of motor fuel (Article 12-A), check here and see instructions for attachments required.

Use labeled form and return envelope for filing your return.

Mail your return and payment on or before July 20, 1997, in the enclosed envelope to the applicable PO box below.

If you are a vendor participating in the PromptTax program, mail your return to: **PROMPTAX — FUEL TAX
P O BOX 1506
CHURCH STREET STATION
NEW YORK NY 10008-1506**

If you do not participate in the Prompt Tax program and your place of business is in: **mail your return to:**
Bronx Queens
Kings Westchester
New York County with ZIP codes 10020-10285 **G P O BOX 5464
NEW YORK NY 10087-5464**

Nassau Suffolk **P O BOX 1866
HICKSVILLE NY 11802-1866**

**All other vendors (including those who are located outside New York State) mail your return to:..... PO BOX 917
ALBANY NY 12201-0917**

Need Help?

For information, forms or publications, call the Business Tax Information Center at 1 800 972-1233. For information, you can also call toll free 1 800 225-5829. For forms or publications, call toll free 1 800 462-8100.

Telephone assistance is available from 8:30 a.m. to 4:25 p.m., Monday through Friday.

From areas outside the U.S. and Canada, call (518) 485-6800.

Hotline for the Hearing and Speech Impaired - If you have a hearing or speech impairment and have access to a telecommunications device for the deaf (TDD), you can get answers to your New York State tax questions by calling toll free from the U.S. and Canada 1 800 634-2110. Hours of operation are from 8:30 a.m. to 4:15 p.m., Monday through Friday. If you do not own a TDD, check with independent living centers or community action programs to find out where machines are available for public use.

Persons with Disabilities - In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call the information numbers listed above.

If you need to write, address your letter to: NYS Tax Department, Taxpayer Assistance Bureau, W A Harriman Campus, Albany NY 12227.