

New York State Department of Taxation and Finance

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



		od July 1, 2008, through Jundor identification number	IY 31, 20		ephone number		Daytime telephone nur	nher	Change of business informa	ation
			1 1				()		If your mailing address is incorrect on	
Legal na	me								the label and you have not previously	/
									notified us, enter your correct mailing address next to your preprinted addre	
DBA (do	ina k	ousiness as) name							 If your mail is forwarded to a paid preparer or if your name, employer 	
									identification number, physical address	SS,
Street ad	dres	SS							 or owner/officer/responsible person information has changed, you must fil 	le
									Form DTF-95. If only your address ha	as
City			Sta	ite			ZIP code		changed, you may file Form DTF-96. can get these forms from our Web site	
									or by fax or phone. See Need help? of the back.	'n
Part 1 —	Со	mputation of sales tax prep	avment	on motor fuel —	registered dis	stribu	itors only			
		Α		В	С		D			
			Nun	nber of gallons	Sales tax		Tax due			
		Type of fuel		ubject to tax	prepayment per gallon		(column B × column C)			
Decien	1	Regular			1. 3.					
Region 1		Mid-grade			-					
1		Premium			-					
	4	Total (add lines 1, 2, and 3)			× \$.1475 =	4				
Region	-	Regular				1		·		
2		Mid-grade								
2		Premium								
	8	Total (add lines 5, 6, and 7)			× \$.140 =	8				
	9	Gross sales tax prepayment	on motor f	uel (add lines 4 and	8, column D)				9	
	10a	Credit(s) (see instructions)				10a				
	10b	Refunds previously requested	d on Form	AU-629		10b				
	10c	Net credit (subtract line 10b from	n line 10a)			10c				
	11	Other credits including casua	Ity losses	(see instructions)		11				
	12	Total credits on motor fuel (ad	dd lines 10d	and 11)					12	
	13	Net sales tax prepayment du	e on moto	r fuel (subtract line 1	2 from line 9; see	instru	ctions)		13	
Part 2 —	Со	mputation of sales tax prep	bayment	on diesel motor	fuel — registe	red o	distributors only			
		А		В			С			
		Number of gallons		Sales t	ах		Tax due			
		subject to tax		prepayment p	er gallon		(column A \times column B)			
Region 1	14			× \$.14	75 =	14				
Region 2	15			× \$.14	0 =	15				
	16	Gross sales tax prepayment	on diesel	motor fuel (add lines	s 14 and 15)				16	
	17a	Credit(s) (see instructions)				17a				
	17b	Refunds previously requested	d on Form	AU-629		17b				
	17c	Net credit (subtract line 17b from	n line 17a)			17c				
	18	Credits for casualty losses (se	ee instructio	ons)		18				
		Total credits on diesel motor		,				-	19	
		Net sales tax prepayment du							20	
		Total prepaid tax due on me			-				21	
		PrompTax payment (attach Fo		-	-			H	22	
		Balance due (subtract line 22 fi			,				23	
Parts 3 a	and 4	4 — Motor fuel wholesalers	, jobbers	s, etc., proceed to	o Part 3 on the	e bac	K		For office use only	
Do not	inclu	ide the sales tax prepayment	t reported	on this return in	any other sale	s tax	return, schedule, or re	eport.		
		in the care tax propayment			, enter oute	2 .uA				
Cignoture	<u></u>	andar								
Signature		enuol								

Title	Telephone number	Date
	()	
Signature of preparer (if other than vendor)	Telephone number	Date
	()	
Address		

FT-945/1045 (7/08) (back)

Par	Part 3 — Inventory reconciliation of motor fuel (in gallons) — sellers of motor fuel other than registered distributors only					
24	pening inventory of motor fuel (see instructions)					
	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 (add lines 25 and 26; if line 26 is a loss, subtract line 26 from line 25)				27	
28	28 Motor fuel available for sale (add lines 24 and 27)					
29	9 Motor fuel sold, used, or transferred (see instructions)				29	
30	30 Closing inventory (subtract line 29 from line 28)					

Part 4 — Supplemental information — sellers of motor fuel other than registered distributors only

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

• Mail your return and payment on or before August 20, 2008, in the enclosed envelope to the address below.

- Make the check or money order payable to New York State Sales Tax. Write on the check or money order your sales tax vendor identification number, FT-945/1045, and 7/1 7/31/08.
- All vendors, including those located outside New York State, mail your completed return and payment to:

NYS SALES TAX PROCESSING PO BOX 5464 NEW YORK NY 10087-5464

Note: If you are enrolled in the PrompTax program, please use the preaddressed envelope provided.

Private delivery services

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to mail in your return and tax payment. However, if, at a later date, you need to establish the date you filed your return or paid your tax, you cannot use the date recorded by a private delivery service **unless** you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, *Designated Private Delivery Services*. See *Need help*? below for information on obtaining forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your return, contact that private delivery service for instructions on how to obtain written proof of the date your return was given to the delivery service for delivery. If you use **any** private delivery service, whether it is a designated service or not, send the forms covered by these instructions to: JPMorgan Chase, Lockbox, 4 Metrotech Center - 8th Floor West, Brooklyn NY 11245.

Need help?

www	Internet access: www.nystax.gov (for information, forms, and public	ations)
	Fax-on-demand forms: Forms available 24 hours a day, 7 days a week.	are 1 800 748-3676
A	Telephone assistance is available 5:00 P.M. (eastern time), Monday	
	To order forms and publications:	1 800 462-8100
	Sales Tax Information Center:	1 800 698-2909
	From areas outside the U.S. and outside Canada:	(518) 485-6800



Text Telephone (TTY) Hotline (for persons with hearing and speech disabilities using a TTY): If you have access to a TTY, contact us at 1 800 634-2110. If you do not own a TTY, 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 1 800 972-1233.