

I

New York State Department of Taxation and Finance

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



19

20

21

22

For office use only

. . . . . . . . . . . . . . .

For the period January 1, 2009, through January 31, 2009, only; due February 20, 2009.

Sales tax vendor identification number		Business telephon	e number 🛛 🛛	Daytime telephone number		
Legal name		( )	(	)	<ul> <li>Has your address or business information changed?</li> </ul>	
DBA (doing business as) name					To update your mailing address, visit our Web site at www.nystax.gov and look for the change my address actions for further instructions.	
Street address					<ul> <li>option for further instructions, or enter your correct address on this form. For complete information, see</li> <li>Form FT-945/1045-1, <i>Instructions</i></li> </ul>	
City	State			ZIP code	for Form FT-945/1045-1, Instructions	
L I I I I I I I I I I I I I I I I I I I						
Α	В	С		D		

_		Type of fuel		mber of gallons subject to tax	Sales tax prepayment per gallon		Tax due (column B × column C)			
Region	1	Regular								
1	2	Mid-grade								
	3	Premium								
	4	Total (add lines 1, 2, and 3)			× \$.1475 =	4				
Region	5	Regular								
2	6	Mid-grade								
	7	Premium								
	8	Total (add lines 5, 6, and 7)			× \$.140 =	8				
9		Gross sales tax prepayment	on motor	fuel (add lines 4 and 8	3, column D)				9	
10a Credit		Credit(s) (see instructions)				10a				
	10b Refunds previously requested on Form AU-629			10b						
	10c Net credit (subtract line 10b from line 10a)			10c						
	11 Other credits including casualty losses (see instructions)			11						
	12	Total credits on motor fuel (ad	dd lines 10	c and 11)					12	
	13	Net sales tax prepayment due	e on mote	or fuel (subtract line 1.	2 from line 9; see	instruc	ctions)		13	
Part 2 —	Part 2 — Computation of sales tax prepayment on diesel motor fuel — registered distributors only									
A		В		С						
Number of gallons subject to tax Sales tax		Sales tax prepayme	nt per gallon Tax due (column A × column B)		B)					
Region 1 14		× \$.147	475 = 14							
Region 2	2 15 × \$.140 =		) =	15			1			
	16 Gross sales tax prepayment on diesel motor fuel (add lines 14 and 15)			14 and 15)				16		
	17a Credit(s) (see instructions)			17a						
	17b Refunds previously requested on Form AU-629			17b						

<b>23</b> Balance due (subtract line 22 from line 21; attach a check or money order for this amount; see back)			
Parts 3 and 4 — Motor fuel wholesalers, jobbers, etc.,	proceed to Part 3 on the back		
Do not include the sales tax prepayment reported on the Signature of vendor	is return in any other sales tax returr	n, schedule, or report.	
Title	Telephone number	Date	
Signature of preparer (if other than vendor)	Telephone number	Date	
Address			

19 Total credits on diesel motor fuel (add lines 17c and 18) .....

20 Net sales tax prepayment due on diesel motor fuel (subtract line 19 from line 16) .....

22 PrompTax payment (attach Form FT-945/1045-A, Monthly Schedule FT)

21 Total prepaid tax due on motor fuel and diesel motor fuel (add lines 13 and 20) .....

 17c
 Net credit (subtract line 17b from line 17a)
 17c

 18
 Credits for casualty losses (see instructions)
 18

## Part 3 — 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)		
27	Net adjustments to inventory (add lines 25 and 26; if line 26 is a loss, subtract line 26 from line 25)	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 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 February 20, 2009 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 1/1 1/31/09.
- All vendors, including those enrolled in the PrompTax Program, mail your completed return and payment to:

NYS SALES TAX PROCESSING PO BOX 15176 ALBANY NY 12212-5176

## **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 services 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: Bank of America, 431C Broadway, Menands NY 12204.

## Need help?

www	(for information, forms, and publications)				
	Fax-on-demand forms: Forms available 24 hours a day,	are			
	7 days a week.	1 800 748-3676			
A	<b>Telephone assistance</b> is available 5:00 P.M. (eastern time), Monday	through Friday.			
	Sales Tax Information Center: For in-state callers without free long distance:	(518) 485-2889 1 800 698-2909			
	To order forms and publications: For in-state callers without free	(518) 457-5431			
	long distance:	1 800 462-8100			



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, call the information center.