



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

**0311**

For the period **May 1, 2010**, through **May 31, 2010**, only; due **June 21, 2010**.

Sales tax vendor identification number	Business telephone number ( )	Daytime telephone number ( )	<b>Has your address or business information changed?</b>  To update your mailing address, visit our Web site at <a href="http://www.nystax.gov">www.nystax.gov</a> and look for the change my address option for further instructions, or enter your correct address on this form. For complete information, see Form FT-945/1045-1, <i>Instructions for Form FT-945/1045</i> .
Legal name			
DBA (doing business as) name			
Street address			
City	State	ZIP code	

**Part 1 — Computation of sales tax prepayment on motor fuel — registered distributors only**

	A	B	C	D	
	Type of fuel	Number of gallons subject to tax	Sales tax prepayment per gallon	Tax due (column B × column C)	
<b>Region 1</b>	1 Regular				
	2 Mid-grade				
	3 Premium				
	4 <b>Total</b> (add lines 1, 2, and 3)			× \$.1475 =	4
<b>Region 2</b>	5 Regular				
	6 Mid-grade				
	7 Premium				
	8 <b>Total</b> (add lines 5, 6, and 7)			× \$.140 =	8
9	Gross sales tax prepayment on motor fuel (add lines 4 and 8, column D) .....				9
10a	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 (add lines 10c and 11) .....				12
13	Net sales tax prepayment due on motor fuel (subtract line 12 from line 9; see instructions) .....				13

**Part 2 — Computation of sales tax prepayment on diesel motor fuel — registered distributors only**

	A	B	C	
	Number of gallons subject to tax	Sales tax prepayment per gallon	Tax due (column A × column B)	
<b>Region 1</b>	14	× \$.1475 =	14	
<b>Region 2</b>	15	× \$.140 =	15	
16	Gross sales tax prepayment on diesel motor fuel (add lines 14 and 15) .....			16
17a	Credit(s) (see instructions) .....			17a
17b	Refunds previously requested on Form AU-629.....			17b
17c	Net credit (subtract line 17b from line 17a) .....			17c
18	Credits for casualty losses (see instructions) .....			18
19	Total credits on diesel motor fuel (add lines 17c and 18) .....			19
20	Net sales tax prepayment due on diesel motor fuel (subtract line 19 from line 16) .....			20
21	<b>Total prepaid tax due on motor fuel and diesel motor fuel</b> (add lines 13 and 20) .....			21
22	PrompTax payment (attach Form FT-945/1045-A, Monthly Schedule FT) .....			22
23	Balance due (subtract line 22 from line 21; attach a check or money order for this amount; see back) .....			23

**Parts 3 and 4 — Motor fuel wholesalers, jobbers, etc., proceed to Part 3 on the back**

*For office use only*

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

Signature of vendor

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Title Telephone number Date  
( ) ( )

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

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Address

Sales tax vendor identification number
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**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	
<b>Adjustments to motor fuel inventory:</b>			
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	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 June 21, 2010** 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 **5/1 - 5/31/10**.
- 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 form and tax payment. However, if, at a later date, you need to establish the date you filed 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 form, contact that private delivery service for instructions on how to obtain written proof of the date your form 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?**

 **Internet access:** [www.nystax.gov](http://www.nystax.gov)  
(for information, forms, and publications)

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 **Fax-on-demand forms:** Forms are available 24 hours a day, 7 days a week. 1 800 748-3676

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 **Telephone assistance** is available from 8:00 A.M. to 5:00 P.M. (eastern time), Monday through Friday.

**Sales Tax Information Center:** (518) 485-2889


For in-state callers without free long distance: 1 800 698-2909

To order forms and publications: (518) 457-5431

For in-state callers without free 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.

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 **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.