



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

0313

For the period **May 1, 2012**, through **May 31, 2012**, only; due **June 20, 2012**.

Sales tax vendor identification number	Business telephone number ()	Daytime telephone number ()	Has your address or business information changed? To update your mailing address, visit our Web site (see <i>Need help?</i> in Form FT-945/1045-I, <i>Instructions for Form FT-945/1045</i>) and look for the change my address option for further instructions, or enter your correct address on this form. For complete information, see instructions.
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)	
Region 1	1 Regular				
	2 Mid-grade				
	3 Premium				
	4 Total (add lines 1, 2, and 3)			× \$.1475 =	4
Region 2	5 Regular				
	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, 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)	
Region 1	14	× \$.1475 =	14	
Region 2	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	Total prepaid tax due on motor fuel and diesel motor fuel (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 instructions)			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.

Authorized person	Signature of authorized person		Official title		Date
	E-mail address of authorized person		Telephone number ()		
Paid preparer use only (see instr.)	Firm's name (or yours if self-employed)		Firm's EIN	Preparer's PTIN or SSN	
	Signature of individual preparing this return	Address	City	State	ZIP code
	E-mail address of individual preparing this return	Telephone number ()	Preparer's NYTPRIN	Date	

Sales tax vendor identification number
--

Part 3 — Inventory reconciliation of motor fuel (in gallons) — sellers of motor fuel other than registered distributors only

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

Need help?

See Form FT-945/1045-I, *Instructions for Form FT-945/1045*, for where to file.