

New York State Department of Taxation and Finance

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

		vendor identification number	Business telephone num			mber			
			( )		( )		Has your address or bu	siness	
Legal	nan	ne		information changed?					
				To update your mailing addre					
DBA	doir	ng business as) name		visit our Web site (see <i>Need</i> in Form FT-945/1045-I, <i>Instrufor Form FT-945/1045</i> ) and lo	ıctions				
Stree	ado	dress		for the change my address of for further instructions, or ent your correct address on this	er				
City			State	ZIP code			For complete information, see instructions.		
	_	ur return at www.tax.ny.gov					1		
		2 — Registered distributors only							
		<ul> <li>Motor fuel distributors: enter 0 in bo o tax is due. There is a \$50 penalty for I</li> </ul>		distrik	outors: enter 0 in boxes,	11, 16,	and 21. You <b>must</b> file by the	due	
		omputation of sales tax prepayment		ad di	stributors only				
rait i -		A – Number of gallons subject to tax	B – Sales tax prepayment per gallon	T	Tax due (column A × colu	mn B)			
Region 1	1	A – Number of gallons subject to tax	× \$.1475 =	1	Tax due (column A > colu	1111 10)			
Region 2			× \$.1475 = × \$.140 =	2					
nogion 2		Gross sales tax prepayment on mote	· · · · · · · · · · · · · · · · · · ·				3		
Credit		old to exempt purchasers or exported							
0.00		Region 1 total	• • •	4a	g,				
		Region 2 total							
	<ul><li>5 Net credits (add lines 4a and 4b)</li><li>6 Refunds previously requested on Form AU-629</li></ul>								
	7	Total credits on motor fuel (subtract li	ine 6 from line 5)				7		
	8	Net sales tax prepayment due on me		8					
Part 2 —	Со	mputation of sales tax prepayme	ent on diesel motor fuel — re	giste	red distributors only	/			
		A - Number of gallons subject to tax	<b>B</b> – Sales tax prepayment per gallon	C -	Tax due (column A X colu	mn B)			
Region 1	9		× \$.1475 =	9					
Region 2	10		× \$.140 =	10					
		Gross sales tax prepayment on dies					11		
Credi		sold to exempt purchasers, expo							
		Region 1 total							
		Region 2 total		$\overline{}$					
		Net credits (add lines 12a and 12b)							
	14 Refunds previously requested on Form AU-629							I	
		Total credits on diesel motor fuel (su				Г	15 16		
	16 Net sales tax prepayment due on diesel motor fuel (subtract line 15 from line 11)								
0		Total prepaid tax due on motor fu		17					
Credi		rryforward	-	40	Γ				
		Credit for an overpayment of tax ma					18		
		PrompTax payment (attach Form FT-9		19					
		Subtotal (add lines 18 and 19)					20		
Darte 2		4 — Motor fuel wholesalers, jobb					21		
1 01 13 3	ıııu	- wold luci wildlesalers, jobb	bers, etc., proceed to rait 3 0	е	Dack				

For office use only

Sales tax vendor identification number

Part 3 -	— Inve	ntory reconciliation of motor fuel (in	gallons) — sel	lers of motor fue	l other ti	nan registered d	istribut	ors only				
<b>22</b> Op	Opening inventory of motor fuel (see instructions)							22				
Adjust	ments											
<b>23</b> Pu	rchased	l in-state		23								
<b>24</b> Oth	her gain	(or loss) to inventory (see instructions)		24								
<b>25</b> Ne	t adjust	ments to inventory (add lines 23 and 24; if lir	25	. 25								
<b>26</b> Mo	tor fuel	available for sale (add lines 22 and 25)	26	26								
		sold, used, or transferred (see instructions)		27								
	Closing inventory (subtract line 27 from line 26)											
If you are not a registered distributor of motor fuel (Article 12-A), mark an <i>X</i> here and see instructions for attachments required.  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							
		E-mail address of authorized person			Telephone number			Date				
Paic	Firm	i's name (or yours if self-employed)			Firm's EIN		Prepar	er's PTIN or SSN				
prepar use	Sigi	nature of individual preparing this return	Address			City	Sta	ite ZIP code				
only (see ins	.	ail address of individual preparing this return		Telephone number		Preparer's NYTPRIN		Date				

## Need help?

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