## FT-945/1045

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

Use this	forr	m to report transactions fo	r the per	riod N	lovember	1, 1994, throu	ıgh l	November 30, 1994, on	ly.	<u> </u>
		ndor identification number				elephone numbe		Daytime telephone number		Change of Business Information
	1	1 1 1 1 1 1		1 1	( )			( )		Check here if you have changed your business location and have
Legal na	me			·				A		your business location and have not previously notified us. Enter
									1	this new address in the space next
DBA										to your preprinted address. You must report this, or any other
										change (name, identification
Street										number, mailing address or owner/officer/responsible person
0001										information) on either Form
City, stat	0 7	IP code								DTF-95.1, found in the sales tax return instructions (Form ST-100-I,
Oity, Stat	c, <u>-</u>	ii code								ST-809-1, ST-810-1), or on Form
<u> </u>										DTF-95, Change of Business Information. To request Form
		form and return envelope								DTF-95, call toll free (from New York
		distributors only - Compl								State only) 1 800 462-8100. From areas outside New York
		notor fuel other than reg					Ш	and IV on the back.		State, call (518) 438-1073.
Part I - 0	Con	nputation of Sales Tax Pr	repayme	ent or	Motor F	uel	2012/2014/2014/2014/2014/2014/2014/2014/			
		Column (a)		Columi		Column (c)		Column (d)	25	
		Type of Fuel			Gallons to Tax	Sales Tax		Caluma (b) v. Caluma (a)	11	
		type of Fuel			ictions)	Prepayment Per Gallon		Column (b) × Column (c)	500	
Region	1	Leaded								
15	2	Unleaded								
1	3	Premium					100		7 ek (18)	
	4	Total (add lines 1, 2 and 3)				× \$.078 =	4	A THE RESERVE AND THE STREET AND A		
<u> </u>	-	Leaded				CONTRACTOR	le i			
Region	_	Unleaded								
2	_	Premium			-					
		Total (add lines 5, 6 and 7)				× \$.064 =	Τ.			
	9	1.51	nt on mo	tor fu	ol (add line				- 33	
		, , , , , , , , , , , , , , , , , , , ,								9
		Otredit for sales to exempt purchasers or out-of-state deliveries 10								
		Other credits including casualty losses (see instructions)								
	12	Total credits on motor fuel (add lines 10 and 11; see instructions)								12
Don't II	2500						ne 9;	see instructions)	· • •	13
Part II -	Cor	nputation of Sales Tax Pre	payment	t on I			1		100	
		Column (a)	-	0.1	Colum		-	Column (c)		
Donlan d		Number of Gallons Subject to	iax	Sales		ment Per Gallon	<b>-</b>	Column (a) × Column (b)		
Region 1	_				× \$.08		14			
Region 2	_				× \$.06		15		-	
		Gross sales tax prepayme								16
		Credit for sales to exempt		17						
		Credits for casualty losses							38	
		Total credits on diesel motor fuel (add lines 17 and 18)								19
		Net sales tax prepayment		20						
		Total prepaid tax due (add		21						
		Less PrompTax payment (a		22						
	23	Balance Due. Attach chec	k or mon	ey or	der for this	amount				23
		return and payment in the end							4.	For Office Use Only
— Write of	n th	he check or money order your	dentifica	ation n	umber, forn	n number <i>FT-94</i> :	5/104	5 and the period		
you ar	e re	porting, November 1, 1994, ti State Sales Tax.	hrough N	lovemi	ber 30, 199	4. Make the che	ck o	r money order payable to	h	
		clude the sales tax prepaymer	nt reported	d on th	his return in	any other sales	tax	return, schedule		
or repo	ort.	***								
Signature	of	vendor								
L		Was been a secured as a second								
Title					Telephon	e number	$\Box$	Date		
					( )					
Signature	of	preparer if other than vendor						1		
Lagrigano.										
Address					Telephon	e number		Date		
					10 1		- 1			

Part III - Invento	ory Reconciliation	of Motor Fuel — in	gallons (not required from Registere	ed 12-A Distributors)
	tory of motor fuel (s			24
25 Purchased in-	state			
26 Other gain (or	loss) to inventory (s	see instructions)		
27 Net (line 25 plu	s or minus line 26)			
28 Motor fuel ava	ilable for sale (add I	ines 24 and 27)	*************	28
29 Motor fuel sold	d, used or transferre	ed (see instructions)		29
30 Closing invent	ory (subtract line 29 f	rom line 28)		
Part IV - Supple	mental Informatio	n		
If you are not a r	egistered distributo	or of motor fuel (Articl	e 12-A), check here $\square$ and see instru	actions for attachments required.
If you are a vend	P O BOX 1506  CHURCH STREET STATION			
				NEW YORK NY 10008-1506
If you are a vend	dor located outsid	e New York State w	no does not participate in the	
				P O BOX 917
				ALBANY NY 12201-0917
If your place	of business	Mail return to:		
Albany Broome Chemung Chenango Clinton Columbia Delaware Dutchess Essex	Franklin Fulton Greene Hamilton Herkimer Jefferson Lewis Montgomery Oneida	Orange Otsego Putnam Rensselaer Rockland Saratoga Schenectady Schoharie Schuyler	Steuben St. Lawrence Sullivan Tioga Tompkins Ulster Warren Washington	P O BOX 917 ALBANY NY 12201-0917
New York County	with ZIP codes 10	001-10019		
Bronx Kings	Queens Westchester			P O BOX 2058 CHURCH STREET STATION NEW YORK NY 10008-2058
		020-10285		G P O BOX 5464
namental and individual and in the				NEW YORK NY 10087-5464
Nassau	Suffolk		*** ***********************************	P O BOX 1866 HICKSVILLE NY 11802-1866
Allegany	Erie	Niagara	Seneca	
Cattaraugus Cayuga	Genesee	Onondaga	Wayne	
Cayuga Chautauqua	Livingston Madison	Ontario Orleans	Wyoming Yates	B O BOV 104
Cortland	Monroe	Oswego	Tales	BUFFALO NY 14240-0194

## Need Help?

For forms or publications, call toll free (from New York State only) 1 800 462-8100. From areas outside New York State, call (518) 438-1073.

For information, call the Business Tax Information Center toll free (from the continental U.S. only) 1 800 972-1233. You can also call toll free (from New York State only) 1 800 CALL TAX (1 800 225-5829). From areas outside New York State, call (518) 438-8581.

Telephone assistance is available from 8:30 a.m. to 4:25 p.m., Monday through Friday.

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 the information and assistance numbers listed above.

Hotline for the Hearing and Speech Impaired - If you have a hearing or speech impairment and have access to a telecommunications device for the deaf (TDD), you can get answers to your New York State tax questions by calling toll-free 1 800 634-2110 (within the continental U.S.). Hours of operation are from 8:30 a.m. to 4:15 p.m., Monday through Friday. If you do not own a TDD, check with independent living centers or community action programs to find out where machines are available for public use.

If you need to write, address your letter to: NYS Tax Department, Taxpayer Assistance Bureau, W A Harriman Campus, Albany NY 12227.