

New York State Department of Taxation and Finance

Quarterly Inventory Report by Retail Service Stations and Fixed Base Operators

Do not attach this report to your sales tax return or use it to report sales or to remit sales tax due. This is an information report, not a sales tax return.

Sales tax vendor identification number	Business telephone number		Change of Business Information ☐ Check here if you have changed	
Legal name			your business location and have not previously notified us. Enter this new address in the space next to your	
DBA			preprinted address. You must report this, or any other change (name, identification number, mailing address	
Street			or owner/officer/responsible person information) on either Form DTF-95.1, found in the sales tax return	
City State		ZIP code	instructions (Form ST-100-I, ST-809-I, ST-810-I), or on Form DTF-95, Change of Business Information. To request Form DTF-95, call toll free	
Use labeled form and return envelope for filing your report.			(from New York State only) 1 800 462-8100. From areas outside New	
For the period December 1, 1995, through February 29, 1996	, (due March 25, 1996).		York State, call (518) 438-1073.	
 This information report must be filed quarterly by every retail ven form should be used to report the requested information for all be tax identification number indicated above. You must file a separal identification number. 	usiness locations for which	you file sales t	ax returns under the sales	
 This inventory report must be used to account for motor fuel or cand is to be filed in addition to any other inventory report require 	d as a result of your other			
 Failure to file this report or willfully filing a false report is a misde This report must be filed within 25 days of the end of the quarter 				
Please read the instructions for each part before completing this rep	• •			

Part I - Business Description

Check the box(es) which describe(s) your motor fuel or diesel motor fuel business. You may check more than one box. 1. Service station operator

- 2. Motor fuel or diesel motor fuel wholesaler or jobber
- Registered distributor of motor fuel #M _ 3.
- Registered distributor of diesel motor fuel #D ___ 4.
- Registered distributor of kero-jet fuel #K _

Part II - Inventory Reconciliation (report by type of fuel)

For lines 1-5 add amounts in columns A, B, C and D and enter totals in column E. Enter figures for diesel motor fuel in column F (for kero-jet fuel, preface the number of gallons with a capital "K").

- Line 1 Indicate by gallons and type of fuel, the retail service station or fixed base inventory on hand at the beginning of the quarter being reported. The opening inventory should be the same as the previous quarter's closing inventory; attach an explanation if these figures do not correspond.
- Line 2 Enter by type, the number of gallons of motor fuel or diesel motor fuel purchased during the quarter or transferred from your non-retail marketing locations to your retail service stations (or fixed bases).
- Line 3 Add lines 1 and 2 to determine the amount of motor fuel or diesel motor fuel available for sale.
- Line 4 Enter by type, the number of gallons of motor fuel or diesel motor fuel sold or used during the guarter.
- Line 5 Subtract line 4 from line 3. The amount entered on line 5 is your closing inventory for the guarter being reported and should also be your opening inventory for the next quarter.

		Motor Fuel				E	
		A Leaded	B Regular Unleaded*	C Mid-grade Unleaded	D Premium Unleaded**	E Total (A + B + C + D)	Diesel Motor Fuel***
1	Opening inventory	gal.	gal.	gal.	gal.	gal.	gal.
2	Additions to inventory (see instruction above)	gal.	gal.	gal.	gal.	gal.	gal.
3	Fuel available for sale (add lines 1 and 2)	gal.	gal.	gal.	gal.	gal.	gal.
4	Fuel sold or used	gal.	gal.	gal.	gal.	gal.	gal.
5	Closing inventory (subtract line 4 from line 3)	gal.	gal.	gal.	gal.	gal.	gal.

Unleaded fuel includes kerosene compounds and propane.

Premium fuel includes leaded and unleaded premium and aviation gasoline.

Diesel motor fuel is kerosene (including kero-jet), crude oil and middle distillates or motor fuels suitable for use in the operation of an engine of the diesel type.

Part III - Summary of Motor Fuel and Diesel Motor Fuel Purchases

A retail vendor not registered as a motor fuel distributor under Article 12-A must complete this part for motor fuel purchases.

A retail vendor not registered as a diesel motor fuel distributor or kero-jet fuel distributor under Article 12-A must complete this part for diesel motor fuel purchases.

Enter the information requested in columns A through D for all motor fuel or diesel motor fuel purchased during the quarter for sale or use within New York State.

Column A — For motor fuel purchases:

Enter the name and identification number of the supplier from whom the fuel was purchased as it appears on either Form FT-935, *Certification of Prepayment of Sales Tax and Payment of Motor Fuel Tax and the Petroleum Business Tax*, or other document given to you certifying that the taxes were paid. **List all** suppliers from whom you purchase motor fuel.

If you are a wholesaler, jobber, etc., and reported a transfer of motor fuel from your non-retail marketing locations to your retail service station in *Part III* of Form FT-945/1045, *Report of Sales Tax Prepayment on Motor Fuel/Diesel Motor Fuel*, enter "self" in column A and complete the information requested in columns C and D for that fuel.

For diesel motor fuel purchases:

Enter the name and identification number of the supplier from whom the fuel was purchased as it appears on either Form FT-1000, Certification of Prepayment or Payment of Sales Tax and Payment of the Diesel Motor Fuel Tax and the Petroleum Business Tax, or other document given to you certifying that the taxes were paid. List all suppliers from whom you purchase diesel motor fuel.

- Column B Enter the street and city address of each supplier listed in column A.
- **Column C** Indicate the type of fuel purchased by entering **L** (leased), **U** (regular unleaded), **M** (mid-grade unleaded), **P** (premium unleaded), **D** (diesel) or **K** (kero-jet).
- Column D Enter the total number of gallons for each type of fuel purchased during the quarter from that supplier.

Enter the information requested in columns A through D for those purchases of automotive fuel made in New York State.

A Name and ID Number of Supplier	Address of Supplier	Type of Fuel	Total Gallons Purchased
(Name)		1 401	1 Gronadou
(ID number)			
	oliers for the reporting period. The state at which you motor fuel and which are covered by this report.	,	
Signature of owner or authorized representative			
Title	Telephone ()	number	Date
Signature of preparer (if other than yendor)	Telephone	number	Date