

## FT-945/1045

New York State Department of Taxation and Finance

0399

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

For the period August 1, 1998, through August 31, 1998, only; due September 20, 1998.

Sales tax	ver	ndor identification number		Business tele	ephone number	- 1	Daytime telephone number	Change of Business Information
							( )	If your mailing address is incorrect on the label and you have not previously
Legal name								notified us, enter your correct mailing address next to your preprinted
								address. If your mail is forwarded to a paid preparer or you have any other
DBA								change (name, ID#, physical address
•								or owner/officer responsible person information) complete Form DTF-95.1
Street								found in the quarterly or part-quarterly sales tax return, or Form DTF-95, Change of Business
								Information. To request Form DTF-95,
City, stat	e, ZI	P code	54					call the Business Tax Information Center (See telephone number listed
								on back of form.)
Part I - C	om	putation of Sales Tax Prep				istrit		
		Column (a)	Columi	n (b)	Column (c)		Column (d)	
		Type of Fuel	Number of Subject to Tax (s		Sales Tax Prepayment Per Gallon		Column (b) × Column (c)	
Region	1	Regular						
1	2	Mid-grade						
	3	Premium			· Ly dise in the	1		_
		Total (add lines 1, 2 and 3)			× \$.079 =	4		J
Region		Regular						
2		Mid-grade						
	7	Premium						
	8	Total (add lines 5, 6 and 7)	L		× \$.064 =	8		
	9	Gross sales tax prepayment	and the second of the second o		The state of the s		<del></del>	.   9
	10a Credit for sales to exempt purchasers or out-of-state deliveries 10a 10b Less refunds previously requested on Form AU-629							
	10c     Net credit (subtract line 10b from line 10a).     10c       11     Other credits including casualty losses (see instructions).     11							1
							<u> </u>	
		Total credits on motor fuel (a		\$22	25			The same of the sa
		Net sales tax prepayment du						.   13
Part II -	Con	nputation of Sales Tax Pre	payment on L			stere		
		Column (a)		Column	·	ļ	Column (c)	
B1 1	-	Number of Gallons Subject to	lax Sales		ent Per Gallon		Column (a) × Column (b)	-
Region 1	14			× \$.083		14		-
Region 2								
	16 Gross sales tax prepayment on diesel motor fuel (add lines 14 and 15)							. 16
		Credit for sales to exempt po				17a 17b		
	17b Less refunds previously requested on Form							-
	17c Net credit (subtract line 17b from line 17a)							
	18 Credits for casualty losses (see instructions)							10
19 Total credits on diesel motor fuel (add lines 17c and 18)								CONTRACTOR OF THE PROPERTY OF
	21 22							
	23	Balance due (subtract line 22		AND THE PROPERTY OF THE PROPERTY OF				The state of the s
187-24-								For Office Use Only
		e check or money order: You August 1, 1998, through Au						
		State Sales Tax.	iguot or, room	mano mo on	con or money o	,,,,,,,	ραγασίο το	
— Do <b>no</b>	t inc	lude the sales tax prepaymen	it reported on th	nis return in a	ny other sales	tax re	turn, schedule or report.	
Signature								
Title				Telephone	number		Date	
				( )				
Signature	of p	reparer if other than vendor						
Address				Telephone	number		Date	
				( )	-			

24 Opening inventory of motor fuel (see instructions)	Part III - Inventory Reconciliation of Motor Fuel (in gallons) — Sellers of m	otor fuel other than registere	d distributors only
25 Purchased in-state			
25 Purchased in-state			
26   Section 2016	2017a - 1987 - 1987 - 1987 - 1987 - 1987 - 1987 - 1987 - 1987 - 1987 - 1987 - 1987 - 1987 - 1987 - 1987 - 1987	. 25	
27 Net adjustments to inventory (see instructions). 27 28 Motor fuel available for sale (add ince 24 and 27). 28 29 Motor fuel available for sale (add ince 24 and 27). 29 29 Motor fuel solit, used or transferred (see instructions) 30 20 Closing inventory (subtract line 29 from line 39). 30 20 Closing inventory (subtract line 29 from line 39). 30 21 The TIV - Supplemental Information — Sellers of motor fuel other than registered distributors only if you are not a registered distributor of motor fuel (Article 12-A), check here □ and see instructions for attachments required.  **Use labeled form and return envelope for filling your return. **Mail your return and payment on or before September 20, 1998, in the enclosed envelope to the applicable PO box below.  If you are a vendor participating in the PrompTax program, mail your return to:  **If you are a vendor participating in the PrompTax program, mail your return to:  **If you do not participate in the PrompTax program and your place of business is in:  **Bronx**  **Oueens**  **Cueens**  **Cueens**  **Cueens**  **Nassau**  **Sulfolk**  **Nassau**  **Sulfolk**  **If you are using a private delivery service for any of the above, address your return to:  **PO BOX 1866**  **HICKSVILLE NY 11802-1866**  **PO BOX 976  **ALBANY NY 12211**  **ALBANY NY 12210-0917**  **Ny PROCESSING CENTER**  **4310 BROADWAY**  **MENANDS NY 12204**  **FOR al listing of designated delivery services, see Technical Services Memorandum TSB-M-97(10)S.**			
28 Motor fuel available for sale (auth seas 24 and 27). 29 Motor fuel sold, used or transferred (see instructions). 29 Motor fuel sold, used or transferred (see instructions). 30 Part IV − Supplemental Information — Sellers of motor fuel other than registered distributors only if you are not a registered distributor of motor fuel (Article 12-A), check here ☐ and see instructions for attachments required.  Use labeled form and return envelope for filling your return. Mail your return and payment on or before September 20, 1998, in the enclosed envelope to the applicable PO box below.  If you are a vendor participating in the PrompTax program, mail your return to: NYS PROMPTAX — FUEL TAX PO BOX 1506 CHURCH STREET STATION NEW YORK NY 10069-1506  If you do not participate in the PrompTax program and your place of business is in: mail your return to:  Bronx Queens Kings Westchester G P O BOX 464 New York County with ZIP codes 10020-10285			27
29 Motor fuel sold, used or transferred (see instructions) 30 Closing inventory (subtract line 29 from time 29) 30 Closing inventory (subtract line 29 from time 29) 30 Closing inventory (subtract line 29 from time 29) 30 Closing inventory (subtract line 29 from time 29) 30 Closing inventory (subtract line 29 from time 29) 30 Closing inventory (subtract line 29 from time 29) 30 Closing inventory (subtract line 29 from time 29) 30 Closing inventory (subtract line 29 from time 29) 30 Closing inventory (subtract line 29 from the 29 from the 29 from the 20 from the 20 from the 20 from the 29 from the 20			
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Part IV – Supplemental Information — Sellers of motor fuel other than registered distributors only  If you are not a registered distributor of motor fuel (Article 12-A), check here ☐ and see instructions for attachments required.  Use labeled form and return envelope for filing your return.  Mail your return and payment on or before September 20, 1998, in the enclosed envelope to the applicable PO box below.  If you are a vendor participating in the PrompTax program, mail your return to:  NYS PROMPTAX — FUEL TAX PO BOX 1506 CHURCH STREET STATION NEW YORK NY 10008-1506  If you do not participate in the PrompTax program and your place of business is in:  Bronx			
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Bronx Westchester G P O BOX 5464 New York County with ZIP codes 10020-10285.  Nassau Suffolk.  PO BOX 1866 HICKSVILLE NY 11802-1866  If you are using a private delivery service for any of the above, address your return to:  THE CHASE MANHATTAN BANK NYS GOVERNMENT TAX PROCESSING 12 CORPORATE WOODS BLVD. 4TH FLOOR ALBANY NY 12211  For a listing of designated delivery services, see Technical Services Memorandum TSB-M-97(10)S.  All other vendors (including those who are located outside New York State) mail your return to:	Mail your return and payment on or before September 20, 1998 below.		NYS PROMPTAX — FUEL TAX PO BOX 1506 CHURCH STREET STATION
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Nassau Suffolk	Kings Westchester		
All other vendors (including those who are located outside New York State) mail your return to:  If you are using a private delivery services, see Technical Services Memorandum TSB-M-97(10)S.  NYS GOVERNMENT TAX PROCESSING 12 CORPORATE WOODS BLVD. 4TH FLOOR ALBANY NY 12211  PO BOX 917 ALBANY NY 12201-0917  NYS PROCESSING CENTER 431C BROADWAY MENANDS NY 12204  For a listing of designated delivery services, see Technical Services Memorandum TSB-M-97(10)S.	Nassau Suffolk	***************************************	
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431C BROADWAY MENANDS NY 12204 For a listing of designated delivery services, see Technical Services Memorandum TSB-M-97(10)S.	All other vendors (including those who are located outside New York Stat	te) mail your return to:	
			431C BROADWAY
Need Help?	For a listing of designated delivery services, see Technical Services Memorandum TSB-N	<i>M</i> -97(10)S.	
	Need Heln?	)	

Telephone Assistance is available from 8:30 a.m. to 4:25 p.m. (eastern time), Monday through Friday. For business tax information and forms, call the Business Tax Information Center at 1 800 972-1233. For general information, call toll free 1 800 225-5829. To order forms and publications, call toll free 1 800 462-8100. From areas outside the U.S. and outside Canada, call (518) 485-6800.

Fax-on-Demand Forms Ordering System - Most forms are available by fax 24 hours a day, 7 days a week. Call toll free from the U.S. and Canada 1 800 748-3676. You must use a Touch Tone phone to order by fax. A fax code is used to identify each form.

## Internet Access - http://www.tax.state.ny.us

Access our website for forms, publications, and information.

Hotline for the Hearing and Speech Impaired - If you 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 from the U.S. and Canada 1 800 634-2110. Assistance is available from 8:30 a.m. to 4:15 p.m. (eastern time), 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.

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 numbers listed above.

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