

FT-945/1045

New York State Department of Taxation and Finance

Report of Sales Tax Prepayment

Sales tax vendor identification number			Business telephone number		r Daytime telephone number		r Change of Business Information		
						If your mailing address is incorrect on the label and you have not previously			
Legal na	me	notified us, enter your correct mailing address next to your preprinted address							
		If your mail is forwarded to a paid							
DBA			preparer or you have any other change (name, ID#, physical address or owner/						
		officer responsible person information) complete Form DTF-95.1s, Change of Business Information for Vendors, found in the quarterly or part-quarterly sales							
Street									
								tax return, or Form DTF-95, Change of Business Information. To request	
City, stat	e, Zi	Form DTF-95, call the Business Tax Information Center (See telephone							
		*						number listed on back of form.)	
Part I - C	om	outation of Sales Tax Pre			Registered d	listril	butors only '		
		Column (a)		Column (b)	Column (c)		Column (d)		
		Type of Fuel		mber of Gallons to Tax (see instructions)	Sales Tax Prepayment Per Gallon		Column (b) × Column (c)		
Region	1	Regular							
1	2	Mid-grade							
	3	Premium							
	4	Total (add lines 1, 2 and 3)			× \$.079 =	4	16]	
Region	5	Regular							
2	6	Mid-grade							
704	7	Premium							
	8	Total (add lines 5, 6 and 7)			× \$.064 =	8			
	9	Gross sales tax prepaymen						9	
	10a	Treatment of the state of the s							
		Less refunds previously req			1				
		Net credit (subtract line 10b fi							
		Other credits including casu				11			
		Total credits on motor fuel (add lines 10c and 11; see instructions)						12	
								13	
art II -	Con	putation of Sales Tax Pro	epaymen	(6.45.60	V. C.	stere		T 2727 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Column (a) Column (b) Column (c) Number of Gallons Subject to Tax Sales Tax Prepayment Per Gallon Column (a) × Column (b)								
egion 1	14	Number of Gallons Subject to	o lax	Sales Tax Prepayment Per Gallon × \$.083 =		-	Column (a) × Column (b)		
egion 2	15					14			
egion Z		O		× \$.070		15			
*								16	
	ı/a	Credit for sales to exempt p	ourchasers	s or out-ot-state deliv	veries	17a		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	

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 (add lines 13 and 20)..... 21 22 23

Date

Write on the check or money order: Your identification number, form number FT-945/1045 and the period you are reporting - February 1, 1999, through February 28, 1999. Make the check or money order payable to New York State Sales Tax.

For Office Use Only

— Do not include the sales tax prepayment reported on this return in any other sales tax return, schedule or report.					
Signature of vendor					
Title	Telephone number	Date			
Signature of preparer if other than	vendor				
Address	Telephone number	Date			

Telephone number

24	rt III - Inventory Reconciliation of Motor Fuel (in gallons) — Sellers of mo Opening inventory of motor fuel (see instructions)	tor ider other than	registered u	
	Adjustments to motor fuel inventory:			24
25	Purchased in-state	25		
26	Other gain (or loss) to inventory (see instructions).	26		
27	Net adjustments to inventory (see instructions)	20		27
28	Motor fuel available for sale (add lines 24 and 27)	28		
29	Motor fuel sold, used or transferred (see instructions)	29		
30	Closing inventory (subtract line 29 from line 28)	30		
f yo	t IV – Supplemental Information — Sellers of motor fuel other than registou are not a registered distributor of motor fuel (Article 12-A), check here \Box and se	e instructions for atta	nly chments requ	ired.
AI	ail your return and payment on or before March 20, 1999, in the low. I vendors, except those participating in the PrompTax program, including two York State, mail your completed return to:	those located outs	side N	YS SALES TAX PROCESSING ENERAL POST OFFICE OX 5464 EW YORK NY 10087-5464
Ve	endors who participate in the PrompTax program, mail your completed re	NYS PROMPTAX — FUEL TAX PO BOX 1506 CHURCH STREET STATION NEW YORK NY 10008-1506		
If y	ou are using a private delivery service for either of the above, address the return envelo OCESSING, 12 CORPORATE WOODS BLVD., 4TH FLOOR, ALBANY, NY 12211	pe: The CHASE MANH	ATTAN BANK, I	NYS GOVERNMENT TAX
Fo	r a listing of designated services, see Technical Services Bureau Memorandum TSB-M-97	'(10)S		
	Need Help?			
uie	lephone Assistance is available from 8:30 a.m. to 4:25 p.m. (eastern time), Monda Business Tax Information Center at 1 800 972-1233. For general information, call free 1 800 462-8100. From areas outside the U.S. and outside Canada, call (51	II toll free 1 800 225-5	business tax 5829. To orde	k information and forms, call er forms and publications, call

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.nv.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.