Sales tax vendor identification number

Department of Taxation and Finance

Has your address or business information changed?

Quarterly Inventory Report by Retail Service Stations and Fixed Base Operators

Business telephone number

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.

DBA (doing business as) name Street address City State ZIP code				visit our website Miscellaneous T (see Need help' may also use Fo of Address Chai Accounts, to up- address. To cha (as well as your send in Form D' Account Update	visit our website; otherwise, call the Miscellaneous Tax Information Center (see Need help? on page 2). You may also use Form DTF-96, Report of Address Change for Business Tax Accounts, to update your mailing address. To change additional information (as well as your address), complete and send in Form DTF-95, Business Tax Account Update. You can get these forms from our website, or by phone. See Need	
				пер?.		
Mark an <i>X</i> in the appropriate box to indi	cate the period cover Jun 1 – Aug 31, 20	•	1 – Nov 30, 2025	□ Dec 1 202	25 – Feb 28, 2026	
Due: Jun 20, 2025	Due: Sep 22, 2025		: Dec 22, 2025	Due: Mar	•	
 Every retail vendor purchasing, selling, requested information for all business to separate Form FT-943 for each location Use this form to account for motor fuel of 	ocations for which you having a separate sal	file sales tax returns u es tax identification nu	nder the sales tax ider ımber.	itification number abov	e. You must file a	
addition to any other inventory report re				,		
Part 1 – Business description						
Number of locations – Ind diesel motor fuel and that a			ate at which you make	retail sales of motor f	uel or highway	
PBS number				d by NYS DEC. Attach ales tax identification r		
Mark an X in the box(es) that describe(s)	your motor fuel or high	way diesel motor fuel	business. You may ma	rk an X in more than o	ne box.	
1. Service station operator		□ 4	. Registered distributo	r of motor fuel		
2. MCTD motor fuel wholesaler		□ 5	. Registered distributo	r of diesel motor fuel		
3. Non-MCTD motor fuel wholesaler						
Part 2 - Inventory reconciliation	report by type of fuel))				
For lines 1 through 5, add amounts in colukero-jet fuel, preface the number of gallon Line 1 – Indicate by gallons and type of function inventory should be the same as Line 2 – Enter, by type, the number of gallocations to your retail service st Line 4 – Enter, by type, the number of gallore 5 – Subtract line 4 from line 3. The a	s with a capital K). uel, the retail service stands the previous quarter's llons of motor fuel or hations (or fixed bases) llons of motor fuel or h	tation or fixed-base invectoring inventory; attaighway diesel motor fuduring the quarter.	ventory on hand at the ach an explanation if the sell purchased or transfuel sold or used during	beginning of the quartenese figures do not conferred from your non-rethe quarter.	er. The opening respond. tail marketing	
next quarter.			or fuel	<u>-</u>	E	
	A Regular unleaded*	B Mid-grade unleaded	C Premium unleaded**	D Total (A + B + C)	Highway diesel motor fuel ***	
1 Opening inventory	gal.	gal.	gal.	gal.	gal.	
2 Additions to inventory (see instructions above)	gal.	gal.	gal.	gal.	gal.	
3 Fuel available for sale						
(add lines 1 and 2)	gal.	gal.	gal.	gal.	gal.	
4 Fuel sold or used	gal.	gal.	gal.	gal.	gal _.	
5 Closing inventory (subtract line 4 from line 3)	gal.	gal.	gal.	gal.	gal.	
(Subtract line 4 from line 3)	<u>-</u>	es kerosene compounds		<u> </u>	gui	

- Premium fuel includes unleaded premium and aviation gasoline.

*** Diesel motor fuel is No. 1 diesel fuel, No. 2 diesel fuel, biodiesel, kerosene, fuel oil or other middle distillate and also motor fuel suitable for use in the operation of an engine of the diesel type. Diesel motor fuel does not include any product specifically designated No. 4 diesel fuel.

Non-highway diesel motor fuel is any diesel motor fuel that is designated for use other than on a public highway, (except for the use of the public highway by farmers to reach adjacent lands) and is dyed diesel motor fuel. Highway diesel motor fuel is any diesel motor fuel which is not non-highway diesel motor fuel. Dyed diesel motor fuel is diesel motor fuel which has been dyed in accordance with and for the purpose of complying with 26 USC 4082(a).

Part 3 - Summary of motor fuel and diesel motor fuel purchases

Retail vendors must report motor fuel purchases (if not registered as a motor fuel distributor) and highway diesel motor fuel purchases (if not registered as a diesel motor fuel or kero-jet fuel distributor). Complete columns A through D for fuel purchased in New York State during the quarter.

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 Taxes Paid on Motor Fuel (Prepayment of Sales Tax and Payment of the Motor Fuel Tax and the Petroleum Business Tax), or on another document given to you certifying that the taxes were paid. List all suppliers from whom you purchase motor fuel.

If you are an MCTD or non-MCTD motor fuel wholesaler, and reported a transfer of motor fuel from your non-retail marketing locations to your retail

service station in Part 6 of Form FT-945/1045, *Prepaid Sales Tax on Motor Fuel/Diesel Motor Fuel Return*, 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, Certificate of Prepayment or Payment of Taxes on Diesel Motor Fuel, or on another document given to you certifying that the taxes were paid. List all suppliers from whom you purchase diesel motor fuel.

Column C – Indicate the type of fuel purchased by entering \boldsymbol{U} (regular unleaded), \boldsymbol{M} (mid-grade unleaded), \boldsymbol{P} (premium unleaded), \boldsymbol{D} (diesel), or \boldsymbol{K} (kero-jet).

Column D – Enter the total number of gallons for each type of fuel purchased during the quarter from that supplier.

A – Name and ID number of supplier	B – Address of supplier (street, city, state, and ZIP code)	C - Type of fuel	D – Total gallons purchased
(Name)			
(ID number)			

Attach additional sheets, if necessary, to list all suppliers for the reporting period.

Authoriz	Signature of authorized person		Official title			
person	Email address of authorized person			Telephone number	r	Date
i aid	Firm's name (or yours if self-employed)		Firm's	EIN 	Preparer's	PTIN or SSN
use	Signature of individual preparing this report	Address	_	City	State	ZIP code
only (see instr.)	Email address of individual preparing this report	Telephone number ()	Preparer's	NYTPRIN	NYTPRIN excl. code	Date

Signature

If you are a sole proprietor, you must sign the report and print your title, email address, telephone number, and date.

If you are filing this report for a corporation, partnership, or other type of entity, an officer, employee, or partner must sign the report on behalf of the business, and print their title, email address, telephone number, and date.

If you do not prepare the report yourself, sign, date, and provide the requested taxpayer information. The preparer must also print their or the firm's name, sign the report, and provide the requested preparer information. Also see *Paid preparer's responsibilities* below.

Paid preparer's responsibilities – Under the law, all paid preparers must sign and complete the paid preparer section of the form. Paid preparers may be subject to civil and/or criminal sanctions if they fail to complete this section in full.

When completing this section, enter your New York tax preparer registration identification number (NYTPRIN) if you are required to have one. If you are not required to have a NYTPRIN, enter in the *NYTPRIN excl. code* box one of the specified 2-digit codes listed below that indicates why you are exempt from the registration requirement. You **must** enter a NYTPRIN **or** an exclusion code. Also, you must enter your federal preparer tax identification number (PTIN) if you have one; if not, you must enter your Social Security number.

Code	Exemption type	Code	Exemption type
01	Attorney	02	Employee of attorney
03	CPA	04	Employee of CPA
05	PA (Public Accountant)	06	Employee of PA
07	Enrolled agent	08	Employee of enrolled agent
09	Volunteer tax preparer	10	Employee of business preparing that business' return

Where to file

Mail your report to: NYS Tax Department, Petroleum Tracking Unit, PO Box 15197, Albany NY 12212-5197.

Private delivery service – If you are using a private delivery service, see Publication 55, *Designated Private Delivery Services*.

Need help?



Visit our website at www.tax.ny.gov

- get information and manage your taxes online
- · check for new online services and features

Telephone assistance

Miscellaneous Tax Information Center: 518-457-5735

To order forms and publications: 518-457-5431

Text Telephone (TTY) or TDD Dial 7-1-1 for the equipment users New York Relay Service

Privacy notification – New York State Law requires all government agencies that maintain a system of records to provide notification of the legal authority for any request for personal information, the principal purpose(s) for which the information is to be collected, and where it will be maintained. To view this information, visit our website, or, if you do not have Internet access, call and request Publication 54, *Privacy Notification*. See *Need help?* for the Web address and telephone number.