

FT-945/1045

New York State Department of Taxation and Finance

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

0898

For the period January 1, 1998, through January 31, 1998, only; due February 20, 1998. Sales tax vendor identification number Business telephone number Daytime telephone number Change of Business Information If your mailing address is incorrect on the label and you have not previously notified us, enter your correct mailing address next to your preprinted address. If your mail is forwarded to a Legal name address. If your mail is forwarded to a paid preparer or you have any other change (name, ID#, physical address or owner/officer responsible person information) complete Form DTF-95.1 found in the quarterly or part-quarterly sales tax return, or Form DTF-95, Change of Business Information. To request Form DTF-95, call the Business Tax Information. Center (See telephone number listed) DBA Street City, state, ZIP code Center (See telephone number listed on back of form.) Part I - Computation of Sales Tax Prepayment on Motor Fuel -Registered distributors only Column (a) Column (b) Column (c) Column (d) Sales Tax Number of Gallons Type of Fuel Column (b) × Column (c) Prepayment Subject to Tax (see instructions) Per Gallon 1 Leaded Region Unleaded 1 Premium Total (add lines 1, 2 and 3) \times \$.087 = 5 Leaded Region 6 Unleaded 2 Premium Total (add lines 5, 6 and 7) \times \$.073 = 8 9 Gross sales tax prepayment on motor fuel (add lines 4 and 8) 9 10a Credit for sales to exempt purchasers or out-of-state deliveries 10a 10b Less refunds previously requested on Form AU-629..... 10b 10c Net credit (subtract line 10b from line 10a)..... 11 Other credits including casualty losses (see instructions)..... 12 12 Total credits on motor fuel (add lines 10c and 11; see instructions)..... 13 Net sales tax prepayment due on motor fuel (subtract line 12 from line 9; see instructions) 13 Part II - Computation of Sales Tax Prepayment on Diesel Motor Fuel - Registered distributors only Column (a) Column (b) Column (c) Number of Gallons Subject to Tax Sales Tax Prepayment Per Gallon Column (a) × Column (b) Region 1 14 14 \$.093 Region 2 15 \$.079 16 Gross sales tax prepayment on diesel motor fuel (add lines 14 and 15) 16 17a Credit for sales to exempt purchasers or out-of-state deliveries 17a 17b 17c Net credit (subtract line 17b from line 17a)..... 19 20 Net sales tax prepayment due on diesel motor fuel (subtract line 19 from line 16) 20 21 21 Total prepaid tax due (add lines 13 and 20)..... 22 22 PrompTax payment (attach Monthly Schedule FT) 23 23 Balance due (subtract line 22 from line 21; attach a check or money order for this amount) . . . For Office Use Only Write on the check or money order: Your identification number, form number FT-945/1045 and the period you are reporting - January 1, 1998, through January 31, 1998. Make the check or money order payable to New York State Sales Tax. Do not include the sales tax prepayment reported on this return in any other sales tax return, schedule or report. Signature of vendor Title Date Telephone number Signature of preparer if other than vendor Address Telephone number Date

Part III - I	inventory Reconciliation of Motor Fuel (in gallons) — Sellers of motor fuel	other than registered distributors only
24 Openi	ng inventory of motor fuel (see instructions)	24
	tments to motor fuel inventory:	
25 Purch	ased in-state	
26 Other	gain (or loss) to inventory (see instructions)	
	djustments to inventory (see instructions)	27
	fuel available for sale (add lines 24 and 27)	
	fuel sold, used or transferred (see instructions)	
	g inventory (subtract line 29 from line 28)	
If you are r	Supplemental Information — Sellers of motor fuel other than registered dinot a registered distributor of motor fuel (Article 12-A), check here and see instruction and return envelope for filing your return.	actions for attachments required.
below.	eur return and payment on or before February 20, 1998, in the e	
If you do	o not participate in the Prompt Tax program and your place of business is Queens	s in: mail your return to:
Kings New York	Westchester County with ZIP codes 10020-10285	G P O BOX 5464
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 listin	ng of designated delivery services, see Technical Services Memorandum TSB-M-97(10)S.	
All other	r vendors (including those who are located outside New York State) mail y	your return to: PO BOX 917
		ALBANY NY 12201-0917
59570	using a private delivery service, address your return to:	NYS PROCESSING CENTER 431C BROADWAY
If you are		MENANDS NY 12204
•	ng of designated delivery services, see Technical Services Memorandum TSB-M-97(10)S.	

Need Help?

Telephone Assistance is available from 8:30 a.m. to 4:25 p.m., 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 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., 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.