

# GAS

## Maine Revenue Services Gasoline Distributor Tax Return



00

\*0708000\*

Registration No.

Entity Number

Period Begin

Period End

Due Date

--	--	--	--	--

### 1. Entity Information

#### ***Use this area only to report changes in your business***

2. **OUT OF BUSINESS?** Check here , return permit to Bureau and complete information at right. Date closed: \_\_\_\_\_
3. **OWNERSHIP CHANGE?** If you have changed ownership, indicate the date when this occurred here \_\_\_\_\_ and check the type of change below.
- Incorporated  Partner added or dropped
- Other (explain on reverse)
- Sold to \_\_\_\_\_
4. **NAME CHANGE?** Attach explanation to this return.

ADDRESS CHANGE?: If your address above is incorrect, please make the appropriate changes to the preprinted address.

**Do Not Use Red Ink!**

### Receipts

Beginning Inventory		1.	_____ , _____ , _____
Gallons Received - Tax Paid	Sch 1	2.	_____ , _____ , _____
Gallons Received - Tax Unpaid	Sch 2	3.	_____ , _____ , _____
Gallons Imported - Direct to Customer	Sch 3	4.	_____ , _____ , _____
Gallons Imported - Bulk Storage	Sch 4	5.	_____ , _____ , _____
Total Receipts (total lines 2 through 5)		6.	_____ , _____ , _____
Available Gallons (line 1 plus line 6)		7.	_____ , _____ , _____
Ending Inventory		8.	_____ , _____ , _____
Accountable Gallons (line 7 minus line 8)		9.	_____ , _____ , _____

### Sales

Total Gallons Sold		1.	_____ , _____ , _____
Exports	Sch 7	2.	_____ , _____ , _____
Sales to Licensed Distributors	Sch 6	3.	_____ , _____ , _____
Bulk Sales to United States Government	Sch 8	4.	_____ , _____ , _____
Bulk Sales to Agencies or Political Subs of this State	Sch 9	5.	_____ , _____ , _____
Jet Fuel for International Flights	Sch 10	6.	_____ , _____ , _____
Total Exempt Sales - (add lines 2 though 6)		7.	_____ , _____ , _____
Taxable Gallons - (line 1 minus line 7)		8.	_____ , _____ , _____

**Maine Revenue Services  
Gasoline Distributor Tax Return  
Page 2**



00

Make check or money order payable to the STATE TREASURER and send your remittance with your return postmarked by the due date printed on the top of the return. Please record your registration number on your check. Failure to file a return on or before the due date will result in interest and penalty charges. Billings will be issued shortly after the processing of your return. **A return must be filed even if there were no sales or purchases during the period.**

**Tax Computation**

		Gallons		Tax
Taxable Sales of Gasoline	Sch 5	9.	_____ @ \$.276	_____
Taxable Sales of Aviation Gas	Sch 5	10.	_____ @ \$.276	_____
Taxable Sales of Jet Fuel	Sch 5	11.	_____ @ \$.034	_____
Total Taxable Gallons Sold (must equal line 8)		12.	_____	
Net Excise Tax Due (total lines 9, 10 and 11)				13. _____
Dealer Credit Card Sales to U.S. Government	Sch 22			14. _____
Excise Tax Paid Purchases	Sch 1			15. _____
Credit from Prior Period				16. _____
Amount Due	Line 13 less lines 14, 15 and 16. Use line 18 if result is a credit. Must equal lines 19+20+21			17. _____
Credit Due	If line 13 minus lines 14, 15 and 16 is a credit, enter the amount to the right. Must equal lines 19+20+21.			18. _____
	If you wish a refund rather than a carry forward to the next period, check here.		<input type="checkbox"/>	
Net Excise Tax - Gasoline				19. _____
Net Excise Tax - Aviation Fuel				20. _____
Net Excise Tax - Jet Fuel				21. _____

The following are attached to this return to support one or more of the above schedules:

Receipts	Sch. 1	<input type="checkbox"/>	Disbursements	Sch. 5	<input type="checkbox"/>
	Sch. 2	<input type="checkbox"/>		Sch. 6	<input type="checkbox"/>
	Sch. 3	<input type="checkbox"/>		Sch. 7	<input type="checkbox"/>
	Sch. 4	<input type="checkbox"/>		Sch. 8	<input type="checkbox"/>
				Sch. 9	<input type="checkbox"/>
				Sch. 10	<input type="checkbox"/>
Credits	Sch. 22	<input type="checkbox"/>			



Mail To:  
Maine Revenue Service  
P.O. Box 1064  
Augusta, ME 04332-1064

Signature/Title \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_ Phone # \_\_\_\_\_