



ALABAMA DEPARTMENT OF REVENUE
BUSINESS & LICENSE TAX DIVISION
MOTOR FUELS SECTION

P.O. Box 327540 • Montgomery, AL 36132-7540 • (334) 242-9608 • Fax (334) 242-1199
www.revenue.alabama.gov

Motor Fuel Terminal Operator Annual Report

NAME			YEAR ENDING		LICENSE NUMBER		FEIN	
ADDRESS				CITY		STATE		ZIP
<input type="checkbox"/> Check Here If New Address	CONTACT NAME		PHONE NUMBER ()		E-MAIL ADDRESS			TERMINAL CODE NUMBER

COMPUTATION OF UNACCOUNTED FOR LOSSES		A GASOLINE		B UNDYED DIESEL		C DYED DIESEL		D AVIATION GAS		E JET FUEL	
1 Beginning Inventory											
2 Total Receipts for the Year											
3 Total (Add Lines 1 and 2)											
4 Total Disbursements for the Year											
5 Ending Inventory											
6 Total (Add Lines 4 and 5)											
7 Total Loss (Line 3 minus Line 6)											
8 Loss Allowance (Line 4 X .005)											
9 Unaccounted For Loss (Line 7 minus Line 8)											
10 Tax Rates		\$0.29		\$0.30				\$0.095		\$0.035	
11 Tax Due (Line 9 X Line 10)											
12 Late File Penalty											
13 Late Pay Penalty											
14 Interest											
15 Total Due (Add Lines 11, 12, 13, and 14)											
16 Total Amount Due (Enter total amount due of all tax types from Line 15, Columns A, B, D, and E) Payments Over \$750 Must be Paid Electronically.									PAY THIS AMOUNT		

This report and payment are due on or before the last day of January following the calendar year covered. If the due date falls on a weekend or state holiday, then the return is due the next business day.

Under penalties of perjury, I declare that I have examined this report, including all accompanying documents, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature: _____ Date: _____ Title: _____ Telephone Number: (_____)_____