



## FR-400M MOTOR FUEL TAX RETURN



This is a FILL-IN format. Please do not handwrite any data on this form other than your signature.

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		OFF	ICIAL	. USE	ONLY		

_			Vendor ID # 0002						
	deral Employer Identification mber (FEIN) Name of Importer	Tax Period Ending (MMYY)	Fill in if amended return.						
	Mailing address line 1	Fill in if this is a final return.							
	Mailing address line 2	Phone number of person to contact							
	City State								
	Inventories (all Fuels: Diesel & Gasoline)  Gallons	<b>Distribution</b> (all Fuels: Diesel & Gasoline	Gallons						
1.	Opening inventory (including in transit)	10. Sales and transfers out of DC (Schedule 10)							
2.	Receipts at marketing locations in DC from sources outside DC (Schedule 2)								
3.	Receipts at marketing locations in DC from sources within DC (Schedule 3)	nment							
4.	Direct delivery to other states (Schedule 4)								
5.	Direct delivery to customers in DC (Schedule 5)								
6.	Other receipts (Schedule 6)	t)							
7.	Total (add Lines 1 - 6)	4)							
8.	Minus closing inventory (including in transit)								
9.	To be accounted for (Line 7 minus Line 8)								
		18)							
		<ul><li>19. Total taxable distribution (add Lines 16, 17 and</li><li>20. Total of Lines 15 and 19 (must equal Line 9)</li></ul>							
Ta	Computation	<b>Dollars only</b>							
21.	Total taxable distribution of all Fuels: Diesel & Gasoline (from Line	19) X the set rate per gallon	\$ .00						
22.	22. Total Taxable Sales and Use of Diesel Fuel (Schedule 22) gallons only.								
23.	Minus tax paid on purchases (Schedules 2, 3, 4 and 5)	S .00							
24.	24. Minus previously taxed sales to: (a) US Government (b) DC Government (c) Diplomatic Corps Members								
	+	.00							
25.	Subtract total of Lines 23 and 24 from Line 21.	\$ .00							
26.	Adjustment of previous month's report (Schedule 26) Add or dedu	.00							
27.	Tax Due (Combine Lines 25 and 26. If a tax is due, enter the Nill the funds for this payment come from an account o	\$ .00							
28.	Refund Due (Combine Lines 25 and 26. If there is an overp	t. \$ .00							
29	Will the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to an account outside appearance of the refund you requested go to a subject to the refund you request the refundation of th	.00							
	Total amount due (add Lines 27 and 29)	\$ .00							
	Under penalties of law, I declare that I have examined this return and, to the best of my knowledge,								
ıt	s correct. Declaration of paid preparer is based on the								
-	fficer's signature	Preparer's Phone Number							

Make check payable to DC TREASURER and mail with return to OFFICE OF TAX AND REVENUE; AUDIT DIVISION; PO BOX 556, WASHINGTON, DC 20044