

North Dakota Office of State Tax Commissioner
 As Contractor for Three Affiliated Tribes Tax Commissioner
Three Affiliated Tribes Motor Vehicle Fuel Tax Report

Tax Type 61
 Form S01

61



Report for Month _____, 20____

Check if Amended Report

Business Name (as it appears on your license)	FEIN	Suffix
Address	License #	
City, Town or Post Office, State, and Zip Code	Telephone #	

This report is due on or before the 25th of the month
 Mail to: Office of State Tax Commissioner
 600 E. Boulevard Ave., Dept. 127
 Bismarck ND 58505-0599

Column A	Column B	Column C	Column D	Column E	Column F
Gasoline	Gasohol E-85	Unblended Ethanol	Unblended Methanol	Blending Components	Column Totals
Pro. 065	Pro. 124, 079	Pro. 241	Pro. 243	Pro. 122	

Check box to cancel license
 Attach license. Cancellation date _____

~~Do not make an entry in a shaded area~~					
1. Inventory forward = last month's line 13 entries.					1. W
2. Gal. mfg., purchased, imported = Schs. 1+2+3.					2. X
3. Product transfers (+ or -) within tax type 61.					3.
4. Not used for tribal report.					4. D
5. Not used for tribal report.					5. F
6. Gal. taxable at \$.23 per gal. = Schs. 5A+5Q.					6.
7. Gal. from \$.23 per gal. tax-pd inven. = Sch. 10G.					7. H
8. Net gal. taxable at \$.23 per gal. = lines 6-7.					8. Q
9. Net gal. gasohol taxable at \$.23 per gal. = lines 6-7.					9. A
10. Gal. non-taxable = Schs. 6+7.					10. N
11. Gal. tax-exempt = Schs. 8+10.					11. L
12. Book inventory = lines 1+2+3-6-10-11.					12.
13. Ending physical inventory.					13. Y
14. Gains (or losses): lines 13-12.					14. B
15. Tax due at \$.23 per gal. = \$.23 x line 8.					15. C
16. Tax due at \$.23 per gal. on gasohol = \$.23 x line 9.					16. R
17. Tax subject to allowance = lines 15+16.					17.
18. Collection allowance = .02 x line 17.					18. I
19. Total tax due = lines 17-18.					19.
20. Penalty = .05 x line 19 (min. \$5.00).	For lines 1 through 16, enter the total of Columns A through E in Column F				20. T
21. Interest = .01 per month x line 19.	For lines 17 through 23, use Column F only				21. U
22. Insp. Fees = total of Col. F (lines 8+9+11) x .00025.					22. 6
23. Total due = lines 19+20+21+22.					23.

I declare under the penalties of North Dakota Century Code § 12.1-11-02, which provides for a Class A misdemeanor for making a false statement in a governmental matter, that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return.

 Signature of Taxpayer Title Date

 Signature of Preparer Other Than Taxpayer Date

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Three Affiliated Tribes Motor Vehicle Fuel Schedule of Gallons Disbursed

Tax Type 61
 Check if Amended Report

(Submit with Three Affiliated Tribes Motor Vehicle Fuel Tax Report S01)

Business Name:	FEIN:	Suffix	License No.:	Reporting Period - Month and Year
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Schedule Types:

- 5 - Not used on Tribal Report
- 5A - Gallons sold to retailers for resale - taxable - loss allowance NOT passed on
- 5Q - Gallons sold to consumers, or used - taxable
- 6 - Gallons sold to licensed suppliers or distributors for resale - non-taxable
- 7 - Gallons exported out of North Dakota by your business - non-taxable
- 8 - Gallons sold to agencies of the U.S. Government - tax-exempt (or tax credit taken)
- 10 - Gallons sold to Native Americans - tax-exempt
- 10G - Gallons sold from tax-paid inventory

Product Types:

- 065 Gasoline
- 079 E85
- 122 Blending Components
- 124 Gasohol
- 241 Ethanol-Alcohol
- 243 Methanol

Mode Codes:

- J Truck
- R Railroad
- B Barge
- PL Pipeline
- S Ship
- GS Gas Station
- CE Summary

= Optional Field

Sch. Type	Pro. Type	(1) Carrier Name	(2) Carrier FEIN	(3) Mode	(4) Point of		(5) Sold to - Purchaser Name	(6) Purchaser		(7) Transaction Date	(8) Document Number	(9) Net Gallons	(10) Gross Gallons	(11) Billed Gallons
					Origin	Destination		FEIN	Suffix					
Totals														