

Department of Taxation and Finance

Terminal Operator's Individual Account Reconciliation



For the month of _____

(month) (year)

Type or print clearly. Read instructions on Form FT-941/941.1-I carefully. Attach this reconciliation to Form FT-941.

Name of terminal operator	Federal employer identification number (EIN)	Account name	Federal employer identification number (EIN)
Terminal location (street and city)	1	Street address	City, state and ZIP code

Part 1 – Reconciliation for each type of fuel	Type of fuel (in gallons)					
	Kerosene	Non-highway diesel motor fuel	Highway diesel motor fuel	Motor fuel	Other fuel	Total gallons
1 Opening inventory						
2 Total receipts (from Part 2)						
3 Subtotal (add lines 1 and 2)						
4 Total withdrawals (from Part 3)						
5 Balance on hand at end of month (subtract line 4 from line 3)						
6 Adjustments (enter any loss in brackets [])						
7 Net inventory (include these amounts in line 1 of Form FT-941)						

Part 2 – Summary of receipts (attach additional sheets, if necessary)			Type of fuel (in gallons)							
Month and day of delivery	Mode of delivery	Carrier's name	Carrier's EIN	Kerosene	Non-highway diesel motor fuel	Highway diesel motor fuel	Motor fuel	Other fuel	Product code*	Total gallons
Total recei	i pts (add each d	column; transfer these totals to Part 1, line	e 2, above)							

* From Publication 902, Product Codes for Fuels

		Type of fuel (in gallons)								
Part 3 – Summary of withdrawals (attach additional sheets, if necessary)			Kerosene	Non-highway diesel motor fuel	Highway diesel motor fuel	Motor fuel	Other fuel	Product code*	Total gallons	
Withdrawals by truck or tank wagon (enter the totals on this line)										
Withdrawa	Is by all other n	nethods (barge, pipeline, book transfer, o	etc.)							
Month and day of withdrawal	Mode of withdrawal (list each separately)	Carrier's name	Carrier's EIN							
Total withdrawals (Add each column. Be sure to include the gallons withdrawn by truck or tank wagon. Transfer totals to the front of the form, Part 1, line 4.)										

* From Publication 902, *Product Codes for Fuels*



Department of Taxation and Finance

Change in Mailing Address for

Petroleum Business Tax Returns

TP-32.3

The mailing address changed for all petroleum business tax returns. The mailing address is (see *Private delivery services* below):

NYS TAX DEPARTMENT PO BOX 15197 ALBANY NY 12212-5197

Note: Forms mailed to old addresses may be delayed in processing.

Private delivery services

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to mail in your form and tax payment. However, if, at a later date, you need to establish the date you filed or paid your tax, you cannot use the date recorded by a private delivery service unless you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, Designated Private Delivery Services. See Need help? for information on obtaining forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your form, contact that private delivery service for instructions on how to obtain written proof of the date your form was given to the delivery service for delivery.

If you are using a private delivery service, send to:

NYS TAX DEPARTMENT RPC – MISC TAX 90 COHOES AVE GREEN ISLAND NY 12183

Need help?



Visit our website at *www.tax.ny.gov*

get information and manage your taxes online

check for new online services and features

Telephone assistance

Miscellaneous Tax Information Center:	518-457-5735
To order forms and publications:	518-457-5431
Text Telephone (TTY) or TDD equipment users	Dial 7-1-1 for the New York Relay Service