



# THREE AFFILIATED TRIBES MOTOR VEHICLE FUEL TAX REPORT

NORTH DAKOTA OFFICE OF STATE TAX COMMISSIONER  
AS CONTRACTOR FOR THREE AFFILIATED TRIBES TAX COMMISSIONER  
SFN 22907 (2-2020)



**TAT**  
**MVF**

Reporting Period - Month and Year

Check if Amended Report

Business Name (as it appears on your license)			Telephone Number		FEIN	Suffix
Address		City	State	ZIP Code	License Number	

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

Check box to cancel license   
Attach license. Cancellation date \_\_\_\_\_

Column A	Column B	Column C	Column D	Column E	Column F
Gasoline Product 065	Gasohol E-85 Product 124, 079	Unblended Ethanol Product 241	Unblended Methanol Product 234	Blending Components Product 055, 061, 122	Column Totals

**Do not make an entry in a shaded area**

1. Inventory forward = last month's line 13 entries . . . . .						1.
2. Gallons mfg., purchased, imported = Schedules 1+2+2A +3						2.
3. Product transfers (+ or -) within tax type MVF . . . . .						3.
4. Not used on Tribal Report						4.
5. Not used on Tribal Report						5.
6. Gallons taxable at \$.23 per gallon = Schedules 5A+5Q . . . .						6.
7. Gallons from \$.23 per gal. tax-pd. inven. = Schedule 10G . .						7.
8. Net gallons taxable at \$.23 per gallon = lines 4-5+6-7 . . . .						8.
9. Net gallons gasohol taxable at \$.23 per gallon = lines 4-5+6-7						9.
10. Gallons ND non-taxable = total of Schedules 6+7+10F . . . .						10.
11. Gallons ND tax-exempt = Schedules 8+10 . . . . .						11.
12. Book inventory = lines 1+2+3-4-6-10-11 . . . . .						12.
13. Ending physical inventory . . . . .						13.
14. Gain (or losses) = lines 13-12 . . . . .						

15. Tax due at \$.23 per gallon = \$.23 x line 8 . . . . .					\$	15.
16. Tax due at \$.23 per gallon on gasohol = \$.23 x line 9 . . . .					\$	16.
17. Tax subject to allowance = lines 15+16. . . . .					\$	17.
18. Collection allowance = .02 x line 17 . . . . .					\$	18.
19. Total tax due = lines 17-18 . . . . .	<b>For lines 1 through 16, enter the total of Columns A through E in Column F</b>				\$	19.
20. Penalty = .05 x line 19 (minimum \$5.00) . . . . .					\$	20.
21. Interest = .01 per month x line 19 . . . . .	<b>For lines 17 through 23, use Column F only</b>				\$	21.
22. Inspection Fees = total of Col. F (lines 8+9+11) x .00025 . .					\$	22.
23. Tax 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	Email	Date

**TAT-**  
**MVF**

# THREE AFFILIATED TRIBES MOTOR VEHICLE FUEL SCHEDULE OF GALLONS RECEIVED

SFN 22907 (2-2020)

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Check if Amended Report

(Submit With Three Affiliated Tribes Motor Vehicle Fuel Tax Report MVF - SFN 22907 (2-2020) Excel)

Business Name	Federal Employer Identification Number	Suffix	License Number	Reporting Period - Month and Year
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**Schedule Types:**

- 1 - Gallons received in North Dakota - ND tax paid
- 2 - Gallons received in North Dakota - ND tax NOT paid
- 2A - Gallons received from terminals, refineries, tax NOT paid
- 3 - Gallons imported into North Dakota by your business - ND tax NOT paid

**Product Types:**

- 055 Butane
- 061 Natural Gasoline
- 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

= Optional Field

Sch. Type	Pro. Type	(1) Carrier Name	(2) Carrier FEIN	(3) Mode	(4) Point of		(5) Purchased From (Seller Name)	(6) Seller FEIN	Suffix	(7) Transaction Date	(8) Document Number	(9) Net Gallons	(10) Gross Gallons	(11) Billed Gallons
					Origin	Destination								
<b>Totals</b>														

**THREE AFFILIATED TRIBES MOTOR VEHICLE FUEL SCHEDULE OF GALLONS DISBURSED**

SFN 22907 (2-2020)

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Check if Amended Report

(Submit With Three Affiliated Tribes Motor Vehicle Fuel Tax Report MVF - SFN 22907 (2-2020) Excel)

Business Name	Federal Employer Identification Number	Suffix	License Number	Reporting Period - Month and Year
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**Schedule Types:**

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

**Product Types:**

- 055 Butane
- 061 Natural Gasoline
- 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 FEIN	Suffix	(7) Transaction Date	(8) Document Number	(9) Net Gallons	(10) Gross Gallons	(11) Billed Gallons
					Origin	Destination								
<b>Totals</b>														

If you are paper filing your tax report and schedules and are paying tax due by check, please mail the following:

- Original, signed tax report and schedules
- Completed payment voucher (below)
- Check payable to the ND State Tax Commissioner

Electronic filing and payment options are available. Please go to **www.tax.nd.gov/tap** for more information.

✂ — — — — — Please cut along perforation and return bottom portion along with payment — — — — —

**FORM ND-MVF - MOTOR VEHICLE FUEL TAX REPORT PAYMENT VOUCHER**

North Dakota Office of State Tax Commissioner  
SFN 22937 (2-2020)

Business Name (as it appears on the fuel license)
Mailing Address
City, State, ZIP Code

Federal Employer Identification Number . . . ▶

Period Ending (mm/dd/yyyy) . . . . . ▶

**Payment Amount** ▶ \$

- Reports and payments due on the 25th day of the month following the report period
- Mail payment and voucher to: Office of State Tax Commissioner  
600 E. Boulevard Ave., Dept. 127  
Bismarck, ND 58505-0599

- Make payable to:  
ND State Tax Commissioner

**MVF**

