

TURTLE MOUNTAIN MOTOR VEHICLE FUEL TAX REPORT
NORTH DAKOTA OFFICE OF STATE TAX COMMISSIONER
AS CONTRACTOR FOR TURTLE MOUNTIAN TRIBE TAX COMMISSIONER SFN 22961 (2-2020)

(=,			_	=	TM		
Reporting Period - Month and Year]	Check if Ame	nded Report		MVF		
Business Name (as it appears on your license)			Telephon	e Number	FEIN	Suffi	ix
Address	City	State	ZIP Code		License Number	r	
This report is due on or before the 25th of the month Mail to: Office of State Tax Commissioner	Column A	Column B	Column C	Column D	Column E	Column F	
600 E. Boulevard Ave., Dept. 127 Bismarck ND 58505-0599 Check box to cancel license Attach license. Cancellation date	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 $1+2+2A+3$	3						2.
3. Product transfers (+ or -) within tax type MVF							3.
4. Not used on Tribal Report							4.
5. Not used on Tribal Report		T			T		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						<u> </u>	8.
9. Net gallons gasohol taxable at \$.23 per gallon = lines 4-5+6						4	9.
10. Gallons ND non-taxable = total of Schedules 6+7+10F							10.
I.1. Gallons ND tax-exempt = Schedules 8+10						 	11.
I.2. Book inventory = lines 1+2+3-4-6-10-11						 	12.
L3. Ending physical inventory							13.
14. Gdill (01 losses) = illies 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	. For lines 1	through 16, enter	the total of Colu	mns A through E i	n Column E	\$	19.
20. Penalty = .05 x line 19 (minimum \$5.00)	For filles 1	tillough 10, enter	the total of Colu	illis A tillough E i	n column r	\$	20.
21. Interest = .01 per month x line 19		For lines 17 +	hrough 23, use C	Column E only		\$	21.
22. Inspection Fees = total of Col. F (lines $8+9+11$) x .00025 .			dagii 25, use C			\$	22.
23. Tax Due = lines 19+20+21+22						\$	23.
loclare under the penalties of North Daketa Century Code S 12	1-11-02 which provides fo	r a Class A misdomoano	or for making a falso s	tatement in a governm	ontal matter that this	roturn including an	.,

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

TM-
MVF

TURTLE MOUNTAIN MOTOR VEHICLE FUEL SCHEDULE OF GALLONS RECEIVED

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Check if Amended Report \square

(Submit With Turtle Mountain Mot	tor Vehicle Fuel Tax Report MVF - S	SFN 22961 (2-2020) Excel)				
Business Name	Federal Employer Identification Number Suffix	License Number	Reporting Period - Month and Year			
Schedule Types:		Product Types:	Mode Codes:			
1 - Gallons received in North Dakota - ND tag	•	055 Butane	J Truck			
2 - Gallons received in North Dakota - ND tax	x NOT paid	061 Natural Gasoline	R Railroad			
2A - Gallons received from terminals, refineri	es, tax NOT paid	065 Gasoline	B Barge			
3 - Gallons imported into North Dakota by yo	our business - ND tax NOT paid	079 E85	PL Pipeline			
	•	122 Blending Components	S Ship			
		124 Gasohol				
= Opt	ional Field	241 Ethanol-Alcohol				
		243 Methanol				

Sch.	Pro.	(1) Carrier	(2) Carrier	(3)	Po:	(4) int of	(5) Purchased From	(6) Seller FEIN		(7) Transaction	(8)	(9) Net	(10) Gross	(11) Billed
Туре	Туре	Name	FEIN	Mode	Origin	Destination	(Seller Name)	FEIN	Suffix	Date	Number	Gallons	Gallons	Gallons
									<u> </u> 					
									<u> </u> 					

TURTLE MOUNTAIN MOTOR VEHICLE FUEL SCHEDULE OF GALLONS DISBURSED

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Check if Amended Report \Box

(Submit with Three Affiliated Trib	es motor venicie ruei Tax Report Mi	7F - SFN 22901 (2-2020) EXCEI)	
Business Name	Federal Employer Identification Number Suffix Li	cense Number	Reporting Period - Month and Year
Schedule Types: 5 - Gallons sold to retailers for resale - ND	taxable - loss allowance passed on	Product Types: 055 Butane	Mode Codes: J Truck
5A - Gallons sold to retailers for resale - ND		061 Natural Gasoline	R Railroad
5Q - Gallons sold to consumers, or used - NI) taxable	065 Gasoline	B Barge
 6 - Gallons sold to licensed suppliers or dis 	tributors for resale - ND non-taxable	079 E85	PL Pipeline
7 - Gallons exported out of North Dakota b	y your business - ND non-taxable	122 Blending Compone	nts S Ship
8 - Gallons sold to agencies of the U.S. Gov	ernment - ND tax-exempt (or tax credit	taken) 124 Gasohol	GS Gas Station
10 - Gallons sold to Native Americans - ND t	ax-exempt	241 Ethanol-Alcohol	CE Summary
10F - Gallons delivered to tax-free storage, o		243 Methanol	
10G - Gallone sold from tax-naid inventory	= Optional Field	d	

Sch.	Pro. Type	(1) Carrier Name	(2) Carrier FEIN	(3) Mode	(Poi Origin	4) nt of	(5) Sold To (Purchaser Name)	(6) Purchase	(6) Purchaser FEIN Suffix		(8) Document Number	(9) Net Gallons	(10) Gross Gallons	(11) Billed Gallons
"		Name	FLIN	Mode	Origin	Destination	(Furchaser Name)	FEIN		Date	- Number		Gallons	Gallolis
									1					
									<u> </u> 					
											Totals			

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.nd.gov/tax/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