## Form **720**

(Rev. October 1997)
Department of the Treasury Internal Revenue Service

# **Quarterly Federal Excise Tax Return**

► For Paperwork Reduction Act Notice, see the separate instructions.

OMB No. 1545-0023

If you are not using
a preprinted label,
enter your name,
address, employer
identification
number, and
calendar quarter of
return. See the
separate
instructions

Name	Quarter ending
Number, street, and room or suite no. (If you have a P.O. box, see page 2.)	Employer identification number
City, state, and ZIP code (If you have a foreign address	s, see page 2.)

FOR IRS USE ONLY								
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Check I	here if this is a final return $ ightharpoonup \square$ or a one-time filing $ ightharpoonup \square$	] (See instruction	าร.)		
Part I					
IRS No.	Environmental Taxes (Attach Form 6627 for all environmental Taxes)	ental taxes.)		Tax	IRS No.
98	Ozone-depleting chemicals (ODCs)				98
19	ODC tax on imported products				19
IRS No.	Communications and Air Transportation Taxes			Tax	IRS No.
22	Toll telephone service, teletypewriter exchange service, ar	nd local telephone	service		22
26	Transportation of persons by air				26
28	Transportation of property by air				28
27	Use of international air travel facilities				27
IRS No.	Fuel Taxes	Number of gallons	Rate	Tax	IRS No.
	(a) Diesel fuel, tax on removal at terminal rack		\$.244		
60	(b) Diesel fuel, tax on taxable events other than removal		}		60
	at terminal rack, including tax on previously untaxed liquids blended with previously taxed diesel fuel		.244		
71	Dyed diesel fuel used in trains		.0565		71
78	Dyed diesel fuel used in certain intercity or local buses		.074		78
61	Liquefied petroleum gas (LPG)		.136		61
79	Other fuels		(See instructions.)		79
	(a) Gasoline, tax on removal at terminal rack		.184 )		
62	(b) Gasoline, tax on taxable events other than removal		}		62
	at terminal rack		.184 J (See instructions.)		
	(c) Gasoline, tax on failure to blend or later separation		(See Instructions.)		
58	Gasoline removed or entered for gasohol production containing at least 10% alcohol		.14444		58
73	Gasoline removed or entered for gasohol production				
	containing at least 7.7% alcohol but less than 10% alcohol		.15430		73
74	Gasoline removed or entered for gasohol production containing at least 5.7% alcohol but less than 7.7% alcohol		.16248		74
59	Gasohol containing at least 10% alcohol		.130		59
75	Gasohol containing at least 7.7% alcohol but less than 10% alcohol		.14242		75
76	Gasohol containing at least 5.7% alcohol but less than 7.7% alcohol		.15322		76
69	Aviation fuel (other than gasoline)		.219		69
14	Aviation gasoline		.194		14
77	Aviation fuel (other than gasoline) for use in commercial		.171		
' '	aviation		.044		77
101	Compressed natural gas (taxed at \$.4854 per thousand cubic feet)				101

Institute   Tax   Institute	Form 720	(Rev. 10-97)						Page 2
Ship Passenger Tax	IRS No.	Retail Tax			Rate		Tax	IRS No.
Transportation by water   Same   Same   Same   Tax   Res No.	33	Truck, trailer, and semitrailer chassis and	bodies, and trac	tors	12% of sales price			33
Differ Excise Tax   Differ Section	IRS No.	Ship Passenger Tax		Number of persons	Rate		Tax	IRS No.
31 Obligations not in registered form Rate Luxury Tax IRS No. 192 Passenger vehicles (See instructions.) 8% of sales price ove \$36,000 92 Passenger vehicles (See instructions.) 8% of sales price ove \$36,000 92 Passenger vehicles (See instructions.) 8% of sales price ove \$36,000 92 Passenger vehicles (See instructions.) 8% of sales price ove \$36,000 92 Passenger vehicles (See instructions.) 8% of sales price Passenger vehicles (See instructions.) 8% of sales price Rate Tax IRS No. 193 Passenger vehicles (See instructions.) 8% of sales price 193 Passenger vehicles (See instructions.) 193 Passenger vehicles vehicle	29	Transportation by water			\$3 per person			29
ILYAUTY Tax   Rate   Tax   RRS No.   Passenger vehicles (See instructions.)   Bis of sales price over \$30,000   92.	IRS No.	Other Excise Tax		Amount of obligations	Rate		Tax	IRS No.
Passenger vehicles (See instructions.)   8% of sales price over \$36,000   92	31	Obligations not in registered form			\$ .01			31
Number of tons   Sales price   Rate   Tax   IRS No.	IRS No.	Luxury Tax		Ra	ate		Tax	IRS No.
Coal—Underground mined	92	Passenger vehicles (See instructions.)		8% of sales pri	ce over \$36,000			92
37   38   Coal—Surface mined   5.55 per ton   38   39   4.4% of sales price   3.9   4.4% of sales price   3.9   3.9   4.4% of sales price   4.4% of	IRS No.	Manufacturers Taxes	Number of tons	Sales price	Rate		Tax	IRS No.
A 4% of sales price   37   38   39   39   39   39   39   39   39	36	Coal—Underground mined			\$1.10 per ton			36
A 4% of sales price   39	37	<b>G</b>			4.4% of sales price			37
66 Highway-type tires (See Instructions.) 40 Gas guzzler tax (Attach Form 6197.) 41 Vaccines (See instructions.) 42 Vaccines (See instructions.) 43 Vaccines (See instructions.) 44 Premiums paid Rate Tax IRS No. 44 Policies Issued by foreign insurers (See instructions.) 45 Casualty insurance and indemnity bonds 46 Life insurance, sickness and accident policies, and annuity contracts 47 Part III 48 Sport fishing equipment 49 Electric outboard motors and sonar devices 40 Sport fishing equipment 41 Sport fishing equipment 42 Electric outboard motors and sonar devices 43 36 of sales price 44 Bows 41 102 Arrow components 42 Electric outboard motors and sonar devices 43 64 Inland waterways fuel use tax 44 Bows 45 11 Alcohol sold as but not used as fuel (See instructions.) 46 Inland waterways fuel use tax 47 Alcohol sold as but not used as fuel (See instructions.) 48 No. Floor Stocks Taxes 49 Total. Add all amounts in Part II. 40 Core-depleting chemicals (floor stocks) (Attach Form 6627.) 40 Core-depleting chemicals (floor stocks) (Attach Form 6627.) 41 Alcohol sold as but not used as fuel (See instructions.) 42 Total. Add all amounts in Part II. 43 Total tax. Add line 1, Part I, and line 2, Part III 44 Adjustments and claims (See instructions.) 55 Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.) 56 Deposits you made for the quarter 57 Overpayment from previous quarter 58 Total of lines 6 and 7. 59 Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service." 58 Virtle your EIN, "Form 720," and the quarter on it 50 Overpayment. If line 8 is greater than line 8. enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:  10 Overpayment. If line 8 is greater than line 8 center the difference. If you have an entry that is less than zero on line 5, com	38	Coal—Surface mined			\$ .55 per ton			38
40 97 Vaccines (See Instructions.)  188 No. Foor Stocks Taxes 102 Arrow components 103 Inland waterways fuel use tax 104 Inland waterways fuel use tax 105 Inland waterways fuel use tax 107 Inland waterways fuel use tax 108 Inland waterways fuel use tax 109 Inland waterways fuel use tax 109 Inland waterways fuel use tax 100 Inland waterways fuel use tax 100 Inland waterways fuel use tax 101 Inland waterways fuel use tax 102 Inland waterways fuel use tax 103 Inland waterways fuel use tax 104 Inland waterways fuel use tax 105 Inland waterways fuel use tax 107 Inland waterways fuel use tax 108 Inland waterways fuel use tax 109 Inland waterways fuel use tax 109 Inland waterways fuel use tax 100 Inland waterways fuel use tax 101 Inland waterways fuel use tax 102 Inland waterways fuel use tax 103 Inland waterways fuel use tax 104 Inland waterways fuel use tax 105 Inland waterways fuel use tax 106 Inland waterways fuel use tax 108 Inland waterways fuel use tax 109 Inland waterways fuel use tax 100 Inland waterways fuel	39				4.4% of sales price			39
97   Vaccines (See instructions.)   97   IRS No.   Foreign Insurance Taxes   Premiums paid   Rate   Tax   IRS No.   Policies issued by foreign insurers (See instructions.)   20   20   20   20   20   20   20   2	66	Highway-type tires (See instructions.)						66
Foreign Insurance Taxes   Premiums paid   Rate   Tax   IRS No.   Policies Issued by foreign insurers (See instructions.)   \$ .04   .01	40	Gas guzzler tax (Attach Form 6197.)						40
Policies issued by foreign insurers (See instructions.) Casualty insurance and indemnity bonds 30 Life insurance, sickness and accident policies, and annulty contracts 0.01 1 Total. Add all amounts in Part I. (Complete Schedule A unless one-time filling.)  Part II  IRS No.  1 Sport fishing equipment 10% of sales price 41 Electric outboard motors and sonar devices 42 Electric outboard motors and sonar devices 43 % of sales price 44 Bows 11% of sales price 44 Bows 11% of sales price 44 Inland waterways fuel use tax 102 Arrow components 12.4% of sales price 102 Inst No. 104 Inland waterways fuel use tax 105 Alcohol sold as but not used as fuel (See instructions.) 105 Inst No. Floor Stocks Taxes 107 Tax Inst No. 108 No Floor Stocks Taxes 108 Tax Inst No. 109 Conce-depleting chemicals (floor stocks) (Attach Form 6627.) 109 Conce-depleting chemicals (floor stocks) (Attach Form 6627.) 100 Corpo-depleting chemicals (floor stocks) (Attach Form 6627.) 100 Total tax. Add line 1, Part I, and line 2, Part II 100 Adjustments and claims (See instructions. Complete Schedule C.) 100 Coverpayment from previous quarter 100 Coverpayment from previous quarter 101 Coverpayment. If line 8 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service." 100 Verpayment. If line 8 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service." 101 Verpayment. If line 8 is greater than line 8, enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment: 101 Under penalties of perjury Idectare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief. It is true, correct, and complete.	97	Vaccines (See instructions.)						97
Policies issued by foreign insurers (See instructions.) Casualty insurance and indemnity bonds  30 Life insurance, sickness and accident policies, and annuity contracts  Notal. Add all amounts in Part I. (Complete Schedule A unless one-time filling.)  Part III  IRS No.  1 Total. Add all amounts in Part I. (Complete Schedule A unless one-time filling.)  Part III  IRS No.  100 Sales price  41  101 Sport fishing equipment  42 Electric outboard motors and sonar devices  378 of sales price  44  102 Arrow components  1124% of sales price  44  102 Arrow components  103 Number of gallons  104 Rate  105 Sales price  44  106 Arrow components  107 Sales price  108 No.  64 Inland waterways fuel use tax  5 244  64  51 Alcohol sold as but not used as fuel (See instructions.)  8 204  20 Corone-depleting chemicals (floor stocks) (Attach Form 6627.)  20 Corone-depleting chemicals (floor stocks) (Attach Form 6627.)  20 Total. Add all amounts in Part II.  Part III  4 Adjustments and claims (See instructions. Complete Schedule C.)  5 Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.)  6 Deposits you made for the quarter  7 Overpayment from previous quarter  8 Total of lines 6 and 7.  9 Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service."  Write your EIN, "Form 720," and the quarter on it.  10 Overpayment. If line 8 is greater than line 8, enter the difference. If you have an entry that is less than zero on line 5, combine lines 3 and line 8. Check if you want the overpayment:    Deplied to your next return, or   Refunded to you.    Under persitties of perjury, Idectare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.	IRS No.	Foreign Insurance Taxes		Premiums paid	Rate		Tax	IRS No.
Casualty insurance and indemnity bonds  1 Itel insurance, sickness and accident policies, and annuity contracts  Reinsurance  1 Total. Add all amounts in Part I. (Complete Schedule A unless one-time filling.)  Part III  IRS No.  41 Sport fishing equipment  42 Electric outboard motors and sonar devices  43 3% of sales price  44 Bows  111% of sales price  44 Bows  111% of sales price  44 Bows  111% of sales price  45 Inland waterways fuel use tax  102 Arrow components  Number of gallons  Rate  Tax  IRS No.  108 No.  118 No.  109 Arrow components  Number of gallons  Rate  Tax  IRS No.  100 Stocks Taxes  Tax  IRS No.  101 Add all amounts in Part II.  Part III  3 Total tax. Add line 1, Part I, and line 2, Part II  4 Adjustments and claims (See instructions. Complete Schedule C.)  5 Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.)  6 Deposits you made for the quarter  7 Overpayment from previous quarter  8 Total of lines 6 and 7.  9 Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "internal Revenue Service."  Write your EIN, "Form 720," and the quarter on it  10 Overpayment. If line 8 is greater than line 8, enter the difference. If you have an entry that is less than zero on line 5, combine line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:		•	nstructions.)					
Reinsurance  1 Total: Add all amounts in Part I. (Complete Schedule A unless one-time filling.)    Rate   Tax   IRS No.					\$ .04			
Total. Add all amounts in Part I. (Complete Schedule A unless one-time filling.)    Rate   Tax   IRS No.	30	Life insurance, sickness and accident policies, an	d annuity contracts		.01			30
Rate   Tax   IRS No.   41   Sport fishing equipment   10% of sales price   41   42   Electric outboard motors and sonar devices   33% of sales price   42   44   Bows   11% of sales price   44   44   Bows   11% of sales price   44   44   Bows   11% of sales price   44   45   11% of sales price   44   46   11% of sales price   44   47   102   Arrow components   12.4% of sales price   44   47   102   Arrow components   12.4% of sales price   44   102   Arrow components   12.4% of sales price   42   102   Arrow components   12.4% of sales price   42   102   Arrow components   102					.01 J			
Rate   Tax   IRS No.   41   Sport fishing equipment   10% of sales price   41   42   Electric outboard motors and sonar devices   3% of sales price   42   44   80ws   11% of sales price   44   44   11% of sales price   44   46   110% of sales price   102   11% of sales price   110   11% of sales price	1 Tot	al. Add all amounts in Part I. (Complete S	chedule A unless	one-time filing.)	<b>&gt;</b>	\$		
41 Sport fishing equipment 42 Electric outboard motors and sonar devices 43 3% of sales price 44 Bows 11% of sales price 44 Bows 11% of sales price 44 102 Arrow components 12.4% of sales price 102 IRS No. 64 Inland waterways fuel use tax 8 Number of gallons 8 Rate 108 Tax 109 IRS No. 65 Inland waterways fuel use tax 100 IRS No. 66 Inland waterways fuel use tax 100 IRS No. 67 Inland waterways fuel use tax 100 IRS No. 68 Inland waterways fuel use tax 100 IRS No. 100 IRS IRS No. 100 IRS IRS No. 100 IRS IRS N	Part I							
42 Electric outboard motors and sonar devices  44 Bows  11% of sales price  42  44 Bows  11% of sales price  44  102 Arrow components  12.4% of sales price  102  IRS No.  64 Inland waterways fuel use tax  5.244  64  51 Alcohol sold as but not used as fuel (See instructions.)  70 Ozone-depleting chemicals (floor stocks) (Attach Form 6627.)  20 Total. Add all amounts in Part II.  8 Total tax. Add line 1, Part I, and line 2, Part II  4 Adjustments and claims (See instructions. Complete Schedule C.)  5 Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.)  6 Deposits you made for the quarter  7 Overpayment from previous quarter.  8 Total of lines 6 and 7.  9 Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service."  Write your EIN, "Form 720," and the quarter on it.  9 Papplied to your next return, or Refunded to you.  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.	IRS No.				Rate		Тах	IRS No.
11% of sales price   44   102   Arrow components   12.4% of sales price   102   102   IRS No.   103   IRS No.   Number of gallons   Rate   Tax   IRS No.   104   IRS No.   105   IRS No.   1	41	Sport fishing equipment			10% of sales price			41
102   Arrow components	42	Electric outboard motors and sonar devi-	ces		3% of sales price			42
IRS No.  64 Inland waterways fuel use tax  51 Alcohol sold as but not used as fuel (See instructions.)  8. 244 64  51 Alcohol sold as but not used as fuel (See instructions.)  53 Tox IRS No.  70 Ozone-depleting chemicals (floor stocks) (Attach Form 6627.)  70 Total. Add all amounts in Part II.  8 Total tax. Add line 1, Part I, and line 2, Part III  70 Adjustments and claims (See instructions. Complete Schedule C.)  8 Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.)  9 Deposits you made for the quarter  7 Overpayment from previous quarter  8 Total of lines 6 and 7.  9 Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service." Write your EIN, "Form 720," and the quarter on it.  10 Overpayment. If line 8 is greater than line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:  10 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.	44	Bows			11% of sales price			44
Sign   Inland waterways fuel use tax   \$ .244   64	102	Arrow components			12.4% of sales price	:		102
Sign   Alcohol sold as but not used as fuel (See instructions.)   .54/.40   .51     RS No.   Floor Stocks Taxes   .20   .20     2 Total. Add all amounts in Part II.	IRS No.			Number of gallons	Rate		Tax	IRS No.
IRS No.   Floor Stocks Taxes   20   Ozone-depleting chemicals (floor stocks) (Attach Form 6627.)   20   2   Total. Add all amounts in Part II.	64	·			\$ .244			64
20 Ozone-depleting chemicals (floor stocks) (Attach Form 6627.)  2 Total. Add all amounts in Part II.  Part III  3 Total tax. Add line 1, Part I, and line 2, Part II  4 Adjustments and claims (See instructions. Complete Schedule C.)  5 Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.)  6 Deposits you made for the quarter  7 Overpayment from previous quarter  8 Total of lines 6 and 7  9 Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service." Write your EIN, "Form 720," and the quarter on it  10 Overpayment. If line 8 is greater than line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:  10 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.	51	Alcohol sold as but not used as fuel (See	e instructions.)		.54/.40			51
2 Total. Add all amounts in Part II.  Part III  3 Total tax. Add line 1, Part I, and line 2, Part II  4 Adjustments and claims (See instructions. Complete Schedule C.)  5 Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.)  6 Deposits you made for the quarter  7 Overpayment from previous quarter  8 Total of lines 6 and 7.  9 Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service."  Write your EIN, "Form 720," and the quarter on it  10 Overpayment. If line 8 is greater than line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:	IRS No.	Floor Stocks Taxes					Тах	IRS No.
Total tax. Add line 1, Part I, and line 2, Part II  Adjustments and claims (See instructions. Complete Schedule C.)  Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.)  Deposits you made for the quarter  Overpayment from previous quarter  Total of lines 6 and 7.  Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service."  Write your EIN, "Form 720," and the quarter on it  Overpayment. If line 8 is greater than line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:    Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.		<u> </u>	Attach Form 6627.)					20
3 Total tax. Add line 1, Part I, and line 2, Part II  4 Adjustments and claims (See instructions. Complete Schedule C.)  5 Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.)  6 Deposits you made for the quarter  7 Overpayment from previous quarter  8 Total of lines 6 and 7  9 Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service." Write your EIN, "Form 720," and the quarter on it  10 Overpayment. If line 8 is greater than line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:    Applied to your next return, or   Refunded to you.    Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.					<u> </u>	\$		
Adjustments and claims (See instructions. Complete Schedule C.)  Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.)  Deposits you made for the quarter  Overpayment from previous quarter  Total of lines 6 and 7.  Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service."  Write your EIN, "Form 720," and the quarter on it  Overpayment. If line 8 is greater than line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:  Applied to your next return, or Refunded to you.  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.	Part I							
Net tax after adjustments and claims. Combine lines 3 and 4. (If no entry on line 4, enter amount from line 3.)  Deposits you made for the quarter  Overpayment from previous quarter  Total of lines 6 and 7.  Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service."  Write your EIN, "Form 720," and the quarter on it  Overpayment. If line 8 is greater than line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:  Applied to your next return, or Refunded to you.  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.	<b>3</b> Tot	al tax. Add line 1, Part I, and line 2, Part I	l			3		
from line 3.)  6 Deposits you made for the quarter  7 Overpayment from previous quarter  8 Total of lines 6 and 7  9 Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service."  Write your EIN, "Form 720," and the quarter on it  10 Overpayment. If line 8 is greater than line 5, enter the difference. If you have an entry that is less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:  Applied to your next return, or Refunded to you.  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.	<b>4</b> Ad	justments and claims (See instructions. Co	mplete Schedule	C.)		4		
6 Deposits you made for the quarter	<b>5</b> Ne	t tax after adjustments and claims. Combir	ne lines 3 and 4. (I	f no entry on line	4, enter amount			
7 Overpayment from previous quarter		•						
8 Total of lines 6 and 7	<b>6</b> De	posits you made for the quarter						
9 Balance Due. If line 5 is greater than line 8, enter the difference. This amount must be paid with the return. Attach check or money order for full amount payable to "Internal Revenue Service."  Write your EIN, "Form 720," and the quarter on it								
the return. Attach check or money order for full amount payable to "Internal Revenue Service."  Write your EIN, "Form 720," and the quarter on it	8 Tot	al of lines 6 and 7		8				
Write your EIN, "Form 720," and the quarter on it								
less than zero on line 5, combine line 5 and line 8. Check if you want the overpayment:  Applied to your next return, or Refunded to you.  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.	the Wr	return. Attach check or money order for ite your EIN, "Form 720," and the quarter	venue Service." ▶	9				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.  Sign	10 Ov	10						
Horo ———————————————————————————————————		Under penalties of perjury, I declare that I have			schedules and statemen	ts, and t	o the best o	f my knowledge
Here Signature Date Title								
	Here	Signature		Date	Title			

Telephone number (

(Please type or print name below signature.)

Form 720 (Rev. 10-97) Page **3** 

### Schedule A Excise Tax Liability (See page 6 of the instructions.)

**Note:** You must complete Schedule A if you have a liability for any tax in Part I of Form 720. Do not complete Schedule A for taxes on bows, arrow components, electric outboard motors and sonar devices, sport fishing equipment, alcohol sold as but not used as fuel, or inland waterways fuel use; for any floor stocks taxes; or for one-time filings.

#### 1 9-day-rule taxes

(a) Record of Net		Period						
Tax Liability		1st-15th day		16th-last day				
First month	Α		В					
Second month	С		D					
Third month	Ε		F					

(b) Net liability for 9-day-rule taxes. (Add the amounts for each semimonthly period.)

2 30-day-rule taxes (IRS Nos. 19 and 98)

(a) Record of Net	Period						
Tax Liability		1st-15th day		16th-last day			
First month	G		Н				
Second month	I		J				
Third month	Κ		L				

(b) Net liability for 30-day-rule taxes. (Add the amounts for each semimonthly period.)

3 Alternative method taxes (IRS Nos. 22, 26, 27, and 28)

(a) Record of Taxes		Pe	riod		
Considered as Collected	1st-15th day		16th-last day		
First month	М		N		
Second month	0		Р		
Third month	Q		R		

(b) Alternative method taxes (Add the amounts for each semimonthly period.)

4 14-day-rule gasoline and diesel fuel taxes (IRS Nos. 14, 60, 62, 58, 73, 74, 59, 75, and 76)

(a) Record of Net			Period		
Tax Liability		1st-15th day		16th-last day	
First month	S		Т		
Second month	U		V		
Third month	W		Х		

**(b)** Net liability for 14-day-rule gasoline and diesel fuel taxes. (Add the amounts for each semimonthly period.)

Form 720 (Rev. 10-97) Page **4** 

#### Schedule C

Adjustments and Claims.

• Complete Schedule C for adjustments and claims *only* if you are reporting a liability in Part I or II of Form 720.

• Attach a statement explaining each adjustment or claim as required. Include your name and EIN on the statement. See page 6 of the instructions.

Par	t I	Adju		previously file														
<b>(a</b> Qua end	rter	(b) IRS No.		(c) Type of tax	Tax as origina on Form 7 previously	ally report 20 or as		(e) Adjusted tax			(decre	ge increase						
1	Tot	al adjust	tments. Cor	nbine all amount	s in column (f).						1							
Par	t II	Clain	ns			Month your	incom	e ta	x year ends	<b>&gt;</b>								
2	Gas	soline (S	Sold for the u	ses described.)			Period of claim   Period of cl											
	use for v Clai	, to a non vessels or mant obta	nprofit education r aircraft, for e ained a certific	onal organization f xport, or for use in	cal government for i or its exclusive use, the production of s rchaser or proof of	as supplies pecial fuels.	Rate*		Gallons	F	Amoui	nt of cla	im	IRS No.				
а	Gas	oline					\$.184							62				
b	Gas	ohol cont	taining at least	10% alcohol			.130							59				
С	Gas	ohol cont	aining at least	7.7% alcohol but	less than 10% alcol	nol	.14242							75				
٦	Coo	ahal aant	taining at lagg	F 70/ alaahal but	loss than 7.70/ alas	hal	.15322							7.				
3			Use of Gas		less than 7.7% alco	ITIOI	13322		iod of claim					76				
	110	паларіс	, osc or out	Johns			Rate*											
	Off-	highway b	business use				\$.184							62				
4			Use of Gas	sohol				Per	iod of claim	<b>•</b>								
	Off-	highway b	business use	of:			Rate*		Gallons		\moui	nt of cla	im	IRS No.				
а	Gas	ohol cont	taining at least	: 10% alcohol			\$.130							59				
b	Gas	ohol cont	taining at least	7.7% alcohol but	less than 10% alcol	hol	.14242							75				
с 5					less than 7.7% alco		.15322		iod of claim					76				
5					of Undyed Diese		5d)	Pei	iou oi ciaiiii									
					contain visible evide													
					did contain visible e	•	e, attach	n a c	detailed explan	atio	n and	check t	his bo	х				
	Cau	ıtion: You	ı cannot make	a claim on lines 5	a through 5c		Rate*		Gallons	F	Amou	nt of cla	im	IRS No.				
	for farn	the tax pa ning purpo	aid on diesel fooses or on die cal governmen															
	the		and c: Claima who sold the				١											
а	Hea	Heating oil																
b		Off-highway business use												60				
С			al and school I	ouses			.244											
d	buy its e	er on a fa	ırm for farminç use. Claimant	purposes or to a obtained the requi	diesel fuel for use to state or local governation in the certificate from mation in the certific	ment for the buyer	.244		J									

<sup>\*</sup>The rates shown apply for fuel bought after September 30, 1997. For rates applicable to earlier periods, see the Form(s) 720 as revised for those periods.

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UIIII	720 (RE	7. 10-71)						raye <b>J</b>
6	Nont	axable Use of Aviation Gasoline	Perio	d of Claim ►				
			Rate	Gallons	1	Amount of cl	aim	IRS No.
а	Used	n foreign trade or in certain aircraft	\$.194*					14
b		n commercial aviation (other than foreign trade)	.15					
7	Nont	axable Use of Aviation Fuel (other than gasoline)	Perio	d of Claim ►				
			Rate	Gallons	_ /	Amount of cl	aim	IRS No.
а	Used	n foreign trade, on a farm, or in certain aircraft	\$.219*					69
								77
		n commercial aviation (other than foreign trade)	.175					
8	Gaso	hol Blenders	Perio	d of Claim ►				
	in a tra	ant bought gasoline taxed at the full rate (\$.184) and blended it with alcohole or business. For <b>each batch</b> of gasohol, claimant has the required in a lused to make the gasohol and to support the amount claimed.						
		Percentage of alcohol in the gasohol	Rate	Gallons of gasoline	1	Amount of cl	aim	IRS No.
а	At leas	st 10% alcohol	\$.03956	1	+			
b		st 7.7% alcohol but less than 10% alcohol	.0297		<b>,</b>			62
		st 5.7% alcohol but less than 7.7% alcohol	.02152					02
9		of Undyed Diesel Fuel—Train and Intercity and Local Bus		d of Claim ▶				
		ant certifies that the diesel fuel did not contain visible evidence of dye.	1 0110	a or orann p				
		of the diesel fuel included in this claim <b>did</b> contain visible evidence of dye.	e, attach a det	ailed explanation	on ar	nd check this	box	🗆
		,	Rate	Gallons		Amount of cl		IRS No.
		ant has in its possession the name and address of the person(s) who he diesel fuel to the claimant and the date(s) of the purchase(s).						
а	Diesel	powered trains	\$.1875					71
		n intercity and local buses	.17*		+			 78
10		claims. See page 7 of the instructions.	,					70
_	S No.	Тах				Amount	of cl	aim
	98	Ozone-depleting chemicals; exported						
	22	Communications tax; exempt use by the customer						
	26	Transportation of persons by air; refunds to customer (other that	n alternative	method)				
	33	Truck, trailer, and semitrailer chassis and bodies; used for further						
	33	Truck, trailer, and semitrailer chassis and bodies, and tractors;	exported					
	66	Tires; used in further manufacture of a taxable article						
	56	Tires; exported, sold or used in foreign trade, or sold to a state nonprofit educational organization	ernment or to	а				
	40	Gas guzzler vehicles; resold for emergency use						
		3						
11	Total	claims. Add all amounts in Part II of Schedule C.			11			
	t III	Total Adjustments and Claims				1		
12		adjustments and claims. Combine the amounts on lines 1 and 1	1. Enter the r	esult here				
		n page 2, Part III, line 4 of Form 720.			12			

<sup>\*</sup>The rates shown apply for fuel bought after September 30, 1997. For rates applicable to earlier periods, see the Form(s) 720 as revised for those periods.



