Modernized e-File Test Package for Excise Tax Returns

Form 720: Quarterly Federal Excise Tax Return for Tax Year 2011Form 2290: Heavy Highway Vehicle Use Tax Return for Tax Year 2011 and;Form 8849: Claim for Refund of Excise Tax for Tax Year 2011

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Internal Revenue Service

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WHO MUST TEST?

All software developers are required to perform the tests in this Test Package before they can be accepted into the Modernized e-File (MeF) Program electronic filing program for the current processing year. Anyone who plans to transmit must perform a communications test and be accepted. Prior to testing, all software developers and transmitters must have obtained an Electronic Transmitter Identification Number (ETIN), Electronic Filer Identification Number (EFIN) and password through the application process. Refer to the Internal Revenue Service's (IRS) e-file Application and Participation (Publication 3112). For the On-Line application procedures refer to the e-Services – Online Tools for Tax Professional page located at irs.gov. This ETIN must be included in each message. The ETIN will be set to "Test" until the transmitter passes the required communication testing with the IRS at which time the ETIN will be moved to "Production" status. The transmitter may also request a Test ETIN, which can be used to continue testing once the original ETIN has been moved to "Production" status. If a transmitter has not revised their IRS *e-file* application to indicate they will be transmitting Excise Tax E-File and Compliance (ETEC) returns, their ETIN will not be valid and their submissions will be rejected. The transmission status (Test or Production) of the ETIN being used must match the Test/Production Indicator in the Message Header or the message will be rejected. The transmitter must also register the system(s) that will be used to conduct business through the MeF System to obtain a systemID. If a transmitter and system(s) are not registered, the transmitter cannot access MeF for Federal/State processing.

WHY TEST?

• Filers transmit in the correct format and meet the IRS' MeF electronic

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 - IRS can receive and process the electronic returns; •
 - Filers understand and are familiar with the mechanics of electronic • filina.

Software developers are not required, but we strongly recommend that you use the Assurance Testing System (ATS) to retest when there are schema changes (minor and major).

WHAT IS TESTED?

The test package for the ATS consists of 3 (three) return scenarios for Forms 720 and 3 (three) for Form 2290 and 6 (six) for Form 8849

Every conceivable condition cannot be represented in the Test; therefore, once you pass the tests, you may want to test any additional conditions you feel are

appropriate as long as you use the predefined EINs and Name Controls, Tax Period and Form types as outlined in Exhibit 3. The scenarios provide the information needed to prepare the selected forms and schedules. You must correctly prepare and compute these returns before transmitting the tests. The IRS strongly recommends each return be run against a parser prior to being transmitted to the IRS. The IRS will run each return against a parser.

Below are some XML resources regarding XML schemas and software tools and parsers (these resources are provided for information only-the IRS is not endorsing any product), you may chose any third party parser toolkit or use your own.

- W3C XML Home Page
- <u>W3C XML Schema Home Page</u>
- XML Spy
- Apache Xerces Parser Toolkit
- Download details: MSXML 4.0 Service Pack 2 (Microsoft XML Core Services)

Note: The MeF's ATS is not configured exactly the same as the MeF Production system. Therefore, a tester should not expect the same response time when testing in the ATS environment versus the Production environment (especially regarding performance or load testing: this includes testing a single extremely large return in one transmission, a lot of large returns in one transmission, or a large number of concurrent transmissions).

FORMATTING THE ENTITIES

The business entities presented in the test scenarios are shown in common usage with commas and periods. Refer to XML efile Types for proper formatting for the business name lines and addresses. No commas or periods are allowed.

Example:

Test Scenario Help For All, Inc. 31 Any Street Anytown, MD 20901

XML Format

Help For All Inc (BusinessNameLine1Type) 31 Any St (StreetAddressType) Anytown (CityType) MD (StateType) 20901 (ZipCodeType)

POPULATING DATA IN THE TEST CASES

We are not providing the forms in the tests in .pdf format. No entry fields are shaded. Do not enter zeroes in the fields where you have no entries unless the form or instructions specifically instruct you to do so.

PASSWORDS

New or revised applicants who will be transmitting to the IRS will receive an eight-digit alphanumeric password that will be used for testing and production. This password will be mailed to the applicants with instructions on how to acknowledge receipt in order to activate. You will change your password when you log in for the first time after your password has been received. It will be valid at the beginning of ATS. If testing will be done through the Internet, applicants will choose their passwords during On-Line Registration.

WHEN TO TEST

When you are ready to test call the e-Help Desk at **1-866-255-0654**. The e-Help Desk assistors will help you with all the necessary preparations to begin testing, including assigning you a Software Identification (ID) Number to use when submitting your returns.

TESTING GUIDELINES FOR SOFTWARE DEVELOPERS

Your software does not have to provide for all forms or schedules, nor for all occurrences of a particular form or schedule. You must advise the e-Help Desk at **1-866-255-0654** of all limitations to your software package at the time of first contact, before testing begins. You must test the complete form with no field limitations except for the number of occurrences.

ELECTRONIC SIGNATURES

Tax Professionals who file Forms 720, 2290 and 8849 have two (2) options of filing a totally paperless return for their clients using the PIN method or the scanned Excise Tax Declaration for an IRS *e-file* Return (Form 8453-EX) method. MeF validates that a signature is present for each return. If the taxpayer uses a PIN to sign the return, all appropriate PIN information must be present in the return header. If the taxpayer uses the Form 8453-EX method, the scanned 8453-EX must be attached to the return. If the electronic return does not contain the required signatures, it will be rejected.

Taxpayers who complete Form 2290, using commercially available software are allowed to sign the return by creating and entering a self-select PIN. Under this exception Form 8453-EX is signed, dated and retained by the taxpayer.

Note: This method is not available to taxpayers who utilize the services of an Electronic Return Originator (ERO).

• Practitioner PIN

The Practitioner PIN option can only be used if the taxpayer uses an ERO. It cannot be used if a taxpayer is filing through an On-Line Provider. If the signature option of "PIN Number" is chosen, the taxpayer and ERO will be required to sign the return with a PIN. The Practitioner PIN option consists of two (2) PINs:

Taxpayer PIN – The taxpayer chooses the PIN that they wish to use to sign their return. The Taxpayer's PIN must be five (5) numeric characters and cannot contain all zeros; and

Practitioner PIN – The ERO selects an eleven position PIN to sign the return. The first six (6) positions of the Practitioner PIN will be made up of the EFIN of the ERO and the next five (5) positions will be made up of five (5) numeric characters that the ERO will select.

The taxpayer must decide whether they want to enter their own PIN or whether they authorize the ERO to enter the PIN they choose as their signature. This authorization is made on the IRS' *e-file* Signature Authorization for Forms 720, 2290, and 8849 (Form 8879-EX). The following fields are required for the Practitioner PIN method or the return will be rejected:

- Practitioner PIN
- PIN Entered By Indicator
- Name of Officer
- Title of Officer
- Taxpayer PIN
- Date Signed

• Scanned Form 8453-EX

The scanned Form 8453-EX method must be used if the taxpayer decides not to use the Practitioner PIN method for signing the return. The Form 8453-EX will be completed and signed by all required parties and then scanned as a .pdf. The appropriate signature option of "Binary Attachment 8453-EX Signature Document" must be identified in the Return Header. If this option is chosen, the taxpayer and ERO (if applicable) must sign the paper 8453-EX. The signed Form 8453-EX must then be scanned into a .pdf document and inserted into the electronic return as a binary attachment. The binary attachment must be named "8453-EX Signature Document."

REVIEWING ACK FILES AND CORRECTING TESTS

You may transmit as many test returns as necessary until you receive no error messages. Any business rule violations must be corrected in order to pass ATS testing.

FINAL TRANSMISSION

Once you receive no rejects, you will be required to transmit the returns in two (2) separate, same-day transmissions in order to test the ability of your software to increment the transmission ID number that appears in the transmission header. Form 720 should be transmitted with two (2) returns in one (1) transmission and one (1) return in the other same-day transmission. Form 2290 should be transmitted with two (2) returns in one (1) return in the other same-day transmission and one (1) return in the other same-day transmission and one (1) return in the other same-day transmission. Form 8849 should be transmitted with three (3) returns in each same-day transmission.

COMMUNICATION TEST FOR THE e-file SYSTEM

IRS allows two (2) methods of transmission for ETEC MeF, Internet Filing Application (IFA), and Application to Application (A2A). If you are a Transmitter using accepted software, you must complete an error-free communications test with IFA or A2A. Transmitters, who have passed the communications test and want to continue to test, must request a test ETIN.

If you will be transmitting through the Internet, you will need to perform the communications test through the Internet.

If you will be transmitting through A2A, you will need to perform the communications test through A2A.

If you will be transmitting through all portals, Internet and A2A, communications tests must be performed through both systems.

Note: A Software Developer, who will not transmit, need not perform a communications test.

USING YOUR OWN TEST

If you are a software developer, and have been notified that you have passed the ATS test, you may test with your own data using the same password and ETIN. If you are a transmitter you will need to get a new Test ETIN to continue testing, as your original ETIN will have been moved to "Production" status once you have passed the communications test. You will continue to use the same password. Call the e-Help Desk at **1-866-255-0654** using the Andover Service Center prompt to obtain a new Test ETIN. You must use the same taxpayer entity information (names and EINs) that is provided in the test package for your independent tests. DO NOT use any other EINs. See Exhibit 3 for the list of valid EINs and Name Controls.

EXHIBITS

Click on the links below to access the listed data:

Exhibit 1 – <u>Standard Postal Service State Abbreviations and Zip Codes</u> (can be found under General Information at irs.gov)

Exhibit 2 – <u>Foreign Country Codes</u> (can be found under General Information at irs.gov)

Exhibit 3 - Name Control Aid

Exhibit 4 – List of valid EINs and Name Controls

Exhibit 5 – Tax Year 2011 720 Test Scenarios

Exhibit 6 – Tax Year 2011 2290 Test Scenarios

Exhibit 7 – Tax Year 2011 8849 Test Scenarios

Exhibit 3 - Name Control Aid

Individual Name Controls		
Name Control Underlined	Name	Rule
Individual Names in General:	Control	Individual Names in General:
Ralph <u>Teak</u> Dorothy <u>Will</u> ow Joe <u>McCe</u> dar Torn <u>MacD</u> ouglas Joseph <u>MacT</u> itus	TEAK WILL MCCE MACD MACT	The Name Control consists of the first four characters of the primary taxpayer's last name.
Thomas A. <u>EI-O</u> ak Ann <u>O'Spr</u> uce Mark <u>D'Mag</u> nolia	EL-O OSPR DMAG	The hyphen (-) is the ONLY special character allowed in the Individual Name Control.
Dannette <u>B</u> James P. <u>Ai</u> John A. <u>Fir</u>	B Al FIR	The Name Control must contain no more than four characters. However, it may contain less than four characters. Note: The first character must be an alpha followed by maximum of three blank positions
Daniel P. <u>Di Al</u> mond Mary J. <u>Van E</u> lm Susan L. <u>Von B</u> irch Donald Vander <u>Oak</u>	DIAL VANE VONB OAK	Taxpayers with names such as "Van," "Von" and "Di" are considered as part of the Name Control. Note: See Asian-Pacific Names for exceptions to this rule.
Janet C. Redbud <u>Laur</u> el Dee (Plum) <u>Birc</u> h	LAUR BIRC	When two last names are shown for an individual, derive the Name Control from the second last name of the primary taxpayer. Note: See Exceptions to this rule within Item 2., Hispanic Names
Joan <u>Hick</u> ory-Hawthorn Dale <u>Redw</u> ood-Cedar	HICK REDW	When two last names for an individual are connected by a hyphen, derive the Name Control from the first last name.
Dell <u>Ash</u> & Linda Birch Trey & Joan <u>Euca</u> lyptus	ASH EUCA	On a joint return, whether the taxpayers use the same or different last names, derive the Name Control from the PRIMARY taxpayer's last name. Note: The PRIMARY taxpayer is listed first on the tax form. Taxpayer listed on the second line is the secondary taxpayer.

NAME CONTROL CONVENTIONS

Name Control Underlined Hispanic Names	Name Control	Rule (in priority order) Hispanic Names
Elena <u>del V</u> alle Eduardo <u>de la</u> Rosa Pablo <u>De Ma</u> rtinex Miguel <u>de To</u> rres Juanita <u>de la</u> Fuente B. A. <u>De Ro</u> drigues M. D. <u>de Ga</u> rcia	DELV DELA DEMA DETO DELA DERO DEGA	When "del," "de," or "de la" appear with a Hispanic name, include it as part of the Name Control
Juan <u>Garz</u> a Morales Maria <u>Lope</u> z y Moreno Sylvia <u>Juar</u> ez cle Garcia	GARZ LOPE JUAR	When two Hispanic last names are shown for an individual, derive the Name Control from the first last name. (See Note at the very top of the previous page Note: This rule may not accurately identify all Hispanic last names, but it does provide consistency in IRS Hispanic Name Control.

Name Control Underlined	Name	Rule (in priority order)
Asian-Pacific Names	Control	Asian-Pacific Names
Binh To <u>La</u>	LA	Some Asian-Pacific last names have only two letters.
Nam Quoc <u>Tran</u> & Thuy Thanh Vo	TRAN	Asian-Pacific females rarely change their last names due to marriage.
Dang Van <u>Le</u> Nhat Thi <u>Pham</u>	LE PHAM	When "Van" (male) or "Thi" (female) appear with an Asian-Pacific name, do not include it as part of the Name Control. Note: <u>These are common Asian-Pacific middle names.</u>
Kim Van <u>Nguy</u> en & Thi Tran	NGUY	The name "Nguyen" is a common last name used by both male and female taxpayers.
<u>Kwan</u> , Kim Van & Yue Le	KWAN	The last name may appear first on the name line. Note: On the signature line, the last name often appears first.
Yen-Yin <u>Chiu</u> Jin-Zhang <u>Qiu</u>	CHIU QIU	Asian-Pacific first names often include a hyphen (-). Rarely is an Asian-Pacific taxpayer's <u>last name</u> hyphenated.

Business Name Controls

Business Name Controls in General:

- The Name Control consists of up to four alpha and/or numeric characters.
- The ampersand (&) and hyphen (-) are the only special characters allowed in the Name Control.
- The Name Control can have less, but no more than four characters. Blanks may be present only at the end of the Name Control.
- Note: Do not include "dba" or "fbo" as part of the Name Control. They stand for "doing business as" and "for benefit of"

Business Name Control Valid Characters:

- Alpha (A-Z)
- Numeric (0-9)
- Hyphen (-)
- Ampersand (&)

Special Business Name Controls:

- If an invalid character is used in the name line, drop the special character from the taxpayer's name. Example: Jones.com should be Jones com. An example is 4U.com. The Name Control should be 4UCO.
- When the organization name contains the name of a corporation and both the words "Trust" and "Fund" are present, apply the corporate name control rules.
- If the organization name contains both "Trust" and "Fund" and an individual's name, apply the trust name control rules.

Name Control Underlined	Name	Rule
Sole Proprietorships	Control	Sole Proprietorships (Individuals)
Arthur P. <u>Aspe</u> n, Attorney Jane <u>Heml</u> ock, The Pecan Café John and Mary <u>Redw</u> ood	ASPE HEML REDW	The Name Control is the first four characters of the individual's last name.

Name Control Underlined	Name Control	Rule
Estates		Estates
Frank <u>Waln</u> ut Estate Alan Beech, Exec. Estate of Jan <u>Popl</u> ar Homer J. <u>Mapl</u> e Estate	WALN POPL MAPL	The Name Control is the first four characters of the individual's last name. Note: The decedent's name may be followed by "Estate" on the name line.

Name Control Underlined	Name	Rule
Partnerships	Control	Partnerships
Redbud Restaurant Teak Drywall Finishers Don Hickory, Gen. Ptr. Harold J. Almond & Thad J. Balsam et al Ptr.	REDB TEAK	Derive the Name Control for partnership entities from the trade or business name of the partnership. Note: Specific instructions for name controlling partnerships for Form SS-4 are found in IRM 21.7.13.
Howard Elder Development Co. W. P. Plum & H. N. Laurel	HOWA	
DBA <u>P&L P</u> ump Co <u>Almo</u> nd Group E. J. Fig, M. L. Maple, & R. T. Holly PTRS.	P&LP ALMO	
The <u>Heml</u> ock Cup <u>The H</u> awthorn	HEML THEH	Omit the word "The" when it is followed by more than one word. Include the word "The" when it is followed by only one word.
Bob <u>Oak</u> & Carol Hazel <u>Ceda</u> r, Teak & PINe, Ptrs	OAK CEDA	If no trade or business name is present, derive the Name Control from the last name of the first listed partner following the general rules listed at the beginning of this document.

Name Control Underlined	Name	Rule
Corporations	Control	Corporations
<u>Suma</u> c Field Plow Inc. <u>11th</u> Street Inc. <u>P&P C</u> ompany <u>Y-Z D</u> rive Co. <u>ZZZ C</u> lub <u>Palm</u> Catalpa Ltd. Fir <u>Fir H</u> omeowners Assn.	SUMA 11TH P&PC Y-ZD ZZZC PALM FIRH	Derive the Name Control from the first four significant characters of the corporation name.

Name Control Underlined	Name	Rule
Corporations	Control	Corporations
The <u>Will</u> ow Co. <u>The H</u> awthorn	WILL THEH	When determining a corporation Name Control, omit "The" when it is followed by more than one word. Include the word "The" when it is followed by only one word.
<u>John</u> Hackberry PA <u>Sam S</u> ycamore SC <u>Carl</u> Eucalyptus M.D. P.A.	JOHN SAMS CARL	If an individual name contains any of the following abbreviations, treat it as the business name of the corporation: PC – Professional Corporation SC – Small Corporation PA – Professional Association PS – Professional Service
The <u>Jose</u> ph Holly Foundation <u>Kath</u> ryn Fir Memorial Fdn.	JOSE KATH	Apply corporate Name Control rules when the organization name contains "Fund," "Foundation" or "Fdn"
<u>City</u> of Fort Hickory Board of Commissioners <u>Waln</u> ut County Employees Association <u>Rho A</u> lpha Chapter Alpha Tau Fraternity <u>Hous</u> e Assn. Of Beta XI Chapter of Omicron Delta Kappa	CITY WALN RHOA HOUS	Apply the corporate Name Control rules to local governmental organizations and to chapter names of national fraternal organizations.

Name Control Underlined	Name	Rule
Trusts and Fiduciaries	Control	Trusts and Fiduciaries
Jan <u>Fir</u> Trust FBO Patrick Redwood Chestnut Bank TTEE Donald C. Beec h Trust	FIR BEEC	Derive the Name Control from the name of the trust using the following order of selection: If only an individual is listed, use the first four characters of the last name following the general rules mentioned at
FBO Mary, Karen & Michael Redbud Testamentary Trust U/W Margaret <u>Bals</u> am	BALS	the beginning of this document. Note: Never include any part of the word "trust" in the Name Control.
Cynthia Fit & Laura Fir Richard L. <u>Aste</u> r Charitable Remainder Unitrust	ASTE	
Magnolia Association Charitable Lead Trust	MAGN	When a corporation is listed, use the first four characters of the corporation name.
<u>Ceda</u> r Corp. Employee Benefit Trust	CEDA	
Maple-Birch Endowment Trust John J. Willow, Trustee	MAPL	
Trust No. <u>1219</u> 0 FBO Margaret Laurel	1219	For numbered trusts and GNMA Pools, use the first four digits of the trust number, disregarding any leading zeros
ABCD Trust No. 00 <u>1036</u> Elm Bank	1036	and/or trailing alphas. If there are fewer than four numbers, use the letters "GNMA" to complete the Name
00 <u>20,</u> <u>GN</u> MA POOL <u>G</u> NMA Pool No. 00 <u>100</u> B	20GN 100G	Control.

Name Control Underlined	Name	Rule
Trusts and Fiduciaries	Control	Trusts and Fiduciaries
Testamentary Trust Edward <u>Buck</u> eye TTEE Trust FBO Eugene <u>Euca</u> lyptus Trust FBO The <u>Dogw</u> ood Blossom Society Michael <u>Teak</u> Clifford Trust	BUCK EUCA DOGW TEAK	If none of the above information is present, use the first four characters of the last name of the trustee (TTEE) or beneficiary (FBO) following the rules at the beginning of this document. Note: "Clifford Trust" is the name of a type of trust.

Name Control Underlined	Name	Rule
Other Organizations	Control	Other Organizations
<u>P</u> arent Teachers <u>A</u> ssociation of San Francisco <u>P</u> arent Teachers <u>A</u> ssociation Congress of <u>G</u> eorgia	PTAC PTAG	Derive the Name Control of a Parent Teachers Association from the abbreviation "PTA". The Name Control is "PTA." plus the first letter of the <u>state</u> where the PTA is located. Use the first letter of the state, whether or not the state name is present as a part of the name of the organization.
Local 210 <u>Inte</u> rnational Birch Assn. <u>V</u> FW Post 3120 <u>Labo</u> rer's Union, AFL-CIO Tau Delta Chapter of <u>Alph</u> a Phi <u>Bene</u> volent & Protective Order of Elks (B. P. O. E.)	INTE VETE LABO ALPH BENE	Derive the Name Control from the first four characters of the national title. Note: "VFW" is a common abbreviation for "Veterans of Foreign Wars".
A.I. S.D. R.S.V.P. Post No. 245	AISD RSVP	If the return has an abbreviated first name other than "PTA" and "VFW," the Name Control is the first four characters of the abbreviated name.
Barbara J. Yucca <u>YY Gr</u> ain Inc.	YYGR	When an individual name and corporate name appear, the Name Control is the first four letters of the corporate name.
Diocese of Kansas City <u>St. Ro</u> se Hospital <u>St. Jo</u> seph's Church Diocese of Cypress <u>St. Be</u> rnard's Methodist Church Bldg. Fund	STRO STJO STBE	For churches and their subordinates (i.e., nursing homes, hospitals), derive the Name Control from the legal name of the church.

Name Control Underlined	Name Control	Rule
Exempt Organizations	Control	Exempt Organizations
Friends of <u>Jane</u> Doe Committee to Elect <u>John</u> Smith	JANE JOHN	Use these examples for determining the Name Control for Political Organizations.
<u>Smit</u> h for State Representative <u>Lind</u> a Jones for Congress Citizen for <u>John</u> Harold	SMIT LIND JOHN	

Exhibit 4 – List of valid EINs and Name Controls

Form Name	Control	EIN	Tax Year End Month
8849 Sch 1 Test 1	ESIN	11-1000005	12
8849 Sch 2 Test 2	DSSN	11-1000006	12
8849 Sch 3 Test 3	EFAN	11-1000007	02
8849 Sch 5 Test 4	WBCN	11-1000010	12
8849 Sch 6 Test 5	FSIN	11-1000008	08
8849 Sch 8 Test 6	SOCN	11-1000009	12
Form Name	Control	EIN	Quarter End Date
720-6197 Test 1	SGCN	11-1000002	12/2011
720-6197 Test 2	RRCN	11-1000003	12/2011
720-6627 Test 3	WCSM	11-1000000	12/2011
Form Name	Control	EIN	Tax Period Begin Date
2290 Sch 1 Test 1	SGFN	11-1000004	07/2011
2290 Sch 1 Test 2	PMSN	11-1000011	07/2011
2290 Sch 1 Test 3	BSCN	11-1000012	07/2011

Exhibit 5 – Tax Year 2011 Form 720 Test Scenarios

Originator

EFIN – as assigned Type -PractitionerPin EFIN – as assigned PIN

PinEnteredBy – N/A

SignatureOption – PIN Number

ReturnType - 720

TaxPeriodBeginDate – TaxPeriodEndDate – Quarter End Date – 201103

Filer

EIN - 111000002 Name – SGCN Grove Company NameControl - SGCN USAddress – 1223 Spruce Lane Fairfax VA 22031

Officer

Name – James P Jones Title - President Phone – 7037772121 EmailAddress -DateSigned – self select TaxpayerPin – self select

Preparer

Name – Thomas Doe SSN or PTIN – 123456789 Phone -7037772222 EmailAddress -DatePepared –self select SelfEmployed – Y TaxYear - 2011 binaryAttachmentCount – 0

Form 6197 Gas Guzzler Tax

SGCN Grove Company 111000002

Part II Identification of Models Subject to Gas Guzzle Tax

Line No. No. of Make, model name, and model year Fuel Economy Rating

From above Vehicles

2	1054	BMW M4 Coupe (2001, 2002, 2003, 2004, BMW M6 Conv (2002, 2003, 2004, 2005, BMW Z4 Roadster (2006, 2007)	
3	225	BMW M6 Conv (2002, 2003, 2004, 2005, BMW 540 (2001) BMW 550 (2006, 2007) BMW 650 (2006, 2007) BMW 645 (2005, 2006, 2007)	2006) 20.5-21.5
4	120	BMW 645 (2006, 2007) BMW 760 (2006, 2007)	19.5-20.5
5	2	BMW M5 (2000) BMW Z8 (2001)	18.5-19.5
6	1	BMW 750 (2001)	17.5-18.5
7	2010	BMW M6 (2007)	16.5-17.5
8	203	BMW M5 (2007)	15.5-16.5

Form 720 Test #1	Quarterly Federal Excise Tax Return	TY 2011

Name:	SGCN Grove Compan	у
Taxpayer identification number:		111000002
Number, street, and room:		1223 Spruce Lane
City or town, State, Zip code:		Fairfax VA 22031
Quarter end	ing:	3312011

Line	Data
Final return checkbox	
Address change checkbox	

FORM 720 - PART I

IRS No	Environmental Taxes (attach Form 6627) T	ax IRS No
18	Domestic petroleum oil spill tax	18
21	Imported petroleum products oil spill tax	21
98	Ozone-depleting chemicals (ODCs)	98
19	ODC tax on imported products	19
IRS No	Communications and Air Transportation Taxes T	ax IRS No
22	Local telephone service, toll telephone service, and teletypewriter exchange 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
	60(a) - Diesel fuel, tax on removal at terminal rack 60(b) - Diesel fuel, tax on taxable	0	.244		
60	events other than removal at terminal rack		.244		60
	60 (c) - Diesel fuel, tax on sale or removal of biodiesel mixture other than removal at terminal rack		.244		
104	Diesel-water fuel emulsion		.198		104
105	Dyed diesel fuel, LUST tax		.001		105
107	Dyed kerosene, LUST tax		.001		107
119	LUST tax, other exempt removals (see instructions)		.001		119
35	(a) Kerosene, tax on removal at terminal rack (see instructions)		.244		35
	(b) Kerosene, tax on taxable events other than removal at terminal rack		.244		
69	Kerosene for use in aviation (see instructions)		.219		69
77	Kerosene for use in commercial aviation (other than foreign trade) Kerosene for use in aviation,		.044		77
111	LUST tax on nontaxable uses, including foreign trade		.001		111
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 at terminal rack(c) Gasoline, tax on sale or		.184		62
	removal of alcohol fuel mixture other than removal at terminal rack		.184		
14	Aviation gasoline		.194		14
112	Liquefied petroleum gas (LPG)		.183		112
118	"P Series" fuels		.184		118
120	Compressed natural gas (CNG) (GGE = 126.67 cu. ft.)		.183		120
121	Liquefied hydrogen Any liquid fuel derived from coal		.184		121
122	(including peat) through the Fischer-Tropsch process		.244		122
123	Liquid fuel derived from biomass		.244		123
124	Liquefied natural gas (LNG)		.243		124

33	Retail Tax Truck, trailer, and semitrailer chassis and bodies, and tractors		Rate 12% of sales price	Tax	IRS No 33	
IRS No	Ship Passenger Tax		iber of rsons	Rate	Tax	IRS No
29	Transportation by water	r		\$3 per person		29
IRS No	Other Excise Tax		ount of gations	Rate	Tax	IRS No
31	Obligations not in registered form			.01		31
IRS No	Manufacturers Taxes	Number of tons	Sales price	Rate	Tax	IRS No
36	Coal—Underground mined		price	\$1.10 per ton		36
37	Coal—Underground mined			4.4% of sales price		37
38	Coal—Surface mined			\$.55 per ton		38
39	Coal—Surface mined			4.4% of sales price		39
IRS No	Manufacturers Taxes				Tax	IRS No
108	Taxable tires other than single tires (see instruc Taxable bias ply or sup	tions)	•			108
109	than super single tires (see instructions)	lesigned for	steering)			109
	Taxable tires, super sin	gle tires des ns)	igned for			113

IRS No Manufacturers Taxes

97 Vaccines (see instructions)

IRS No	Foreign Insurance Taxes	Premiums paid	Rate	Tax	IRS No
30	Policies issued by foreign insurers (see instructions) Casualty insurance and indemnity bonds		.04		30
50	Life insurance, sickness and accident policies, and annuity contracts		.01		
	Reinsurance		.01		

1 Total. Add all amounts in Part I. Complete Schedule A unless 8335400.00 one-time filing

FORM 720 - PART II

IRS No		Rate	Tax	IRS No
41	Sport fishing equipment (other than fishing rods and fishing poles)	10% of sales price		41
110	Fishing rods and fishing poles (limits apply, see instructions)	10% of sales price		110
42	Electric outboard motors	3% of sales price		42
114	Fishing tackle boxes	3% of sales price		114
44	Bows, quivers, broadheads, and points	11% of sales price		44
106	Arrow shafts	\$.45 per shaft		106
140	Indoor tanning services	10% of amount paid		140

IRS No		Number of gallons	Rate	Tax	IRS No
64	Inland waterways fuel use tax		\$.20		64
125	LUST tax on inland waterways fuel use (see instructions)		.001		125
51	Alcohol sold as but not used as fuel (see instructions)				51
117	Biodiesel sold as but not used as fuel (see instructions)				117

IRS No 20		r Stocks Tax e-depleting chemicals (floor stocks). Attach Form 6627.	T	ax I	IRS No 20
	2	Total. Add all amounts in Part II.		0.00	
	FORM	/ 720 – PART III			
	3	Total tax. Add line 1, Part I, and line 2, Part II	3	8335400.0)0
	4	Claims (see instructions; complete Schedule C)	4		
	5	Deposits made for the quarter	5	8335400.0	00
		Check here if you used the safe harbor rule to make your deposits. \square			
	6	Overpayment from previous quarters	6		
	7	Enter the amount from Form 720X included on line 6,	7		
	ø	if any Total of lines 5 and 6	o	8335400.0	00
	8 9	Add lines 4 and 8	8 9	8335400.0	
	9 10	Balance Due. If line 3 is greater than line 9, enter the difference. Pay the full amount with the return. Enclose Form 720-V with your check or money order for full amount payable to the "United States Treasury." Write your EIN, "Form 720," and the quarter on it	9 10	8555400.0	
	11	Overpayment. If line 9 is greater than line 3, enter the difference. Check if you want the overpayment: Applied to your next return, Check if you want the overpayment: Refunded to you.	11		

FORM 720 – SCHEDULE A Schedule A Excise Tax Liability (see instructions)

1 Regular method taxes

(a) Record of Net Tax Liability			Period	
5		1 st -15 th day		16 th –last day
First month	А	1088300.00	В	1413200.00
Second month	С	1577400.00	D	1307200.00
Third month	E	1375000.00	F	1574300.00
Special rule for Septem	ıber*		G	
(b) Net liability for regreach semimonthly period		taxes. Add the amou	ints for	8335400.00

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

(a) Record of Taxes			Period	
Considered as Collected		at th	renou	th
		1^{st} – 15^{th} day		16 th –last day
First month	Μ		Ν	
Second month	0		Р	
Third month	Q		R	
Special rule for September*			S	

(b) Alternative method taxes. Add the amounts for each semimonthly period. Complete only as instructed. See the instructions.

FORM 720 – SCHEDULE T Two-Party Exchange Information Reporting (see instructions)

Fuel

Number of gallons

Diesel fuel, gallons received in a two-party exchange within a terminal, included on IRS No. 60(a) on Form 720 Diesel fuel, gallons delivered in a two-party exchange within a terminal Kerosene, gallons received in a two-party exchange within a terminal, included on IRS No. 35(a), 69, 77, or 111 on Form 720 Kerosene, gallons delivered in a two-party exchange within a terminal Gasoline, gallons received in a two-party exchange within a terminal, included on IRS No. 62(a) on Form 720 Gasoline, gallons delivered in a two-party exchange within a terminal Aviation gasoline, gallons received in a two-party exchange within a terminal Aviation gasoline, gallons received in a two-party exchange within a terminal, included on IRS No. 14 on Form 720 Aviation gasoline, gallons delivered in a two-party exchange within a terminal, included on IRS No. 14 on Form 720

Form 720 Schedule C – Claims

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

Month your income tax year ends

1	Nontaxable Use of Gasolin	ne Pe	eriod of c	laim	YYYYMMI YYYYMM	
		Type of use	Rate	Gallons	Amount of claim	CRN
а	Gasoline		\$.183			362
b	Exported		.184			411

2	Nontaxable Use of Aviatio Gasoline	on Pe	eriod of o	claim	YYYYMMI YYYYMM	
		Type of use	Rate	Gallons	Amount of claim	CRN
a	Used in commercial aviation (other than foreign trade)		\$.15			354
b	Other nontaxable use		.193			324
с	Exported		.194			412
d	LUST tax on aviation fuels used in foreign trade		.001			433

3	Nontaxable Use of Undyed Diesel Fuel	Pe	Period of claim			DD- DD
		Type of use	Rate	Gallons	Amount of claim	CRN
a	Nontaxable use		\$.243			360
b	Use in trains		.243			353
c	Use in certain intercity and local buses		.17			350
d	Use on a farm for farming purposes		.243			360
e	Exported		.244			413

Nontaxable Use of Undyed4 Kerosene (Other Than Kerosene Period of claim Used in Aviation)

YYYYMMDD-**YYYYMMDD**

		Type of use	Rate	Gallons	Amount of claim	CRN
а	Nontaxable use		\$.243			346
b	Use in certain intercity and local buses		.17			347
c	Use on a farm for farming purposes		.243			346
d	Exported		.244			414
e	Nontaxable use taxed at \$.044		.043			377
f	Nontaxable use taxed at \$.219		.218			369

5	Kerosene Used in Aviation	n Pe	Period of claim)D- DD
		Type of use	Rate	Gallons	Amount of claim	CRN
a	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244		\$.200			417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219		.175			355
с	Nontaxable use (other than use by state or local government) taxed at \$.244		.243			346
d	Nontaxable use (other than use by state or local government) taxed at \$.219		.218			369
e	LUST tax on aviation fuels used in foreign trade		.001			433

6	No	ntaxable Us	se of Alte	ernative Fu	el	
		Type of use	Rate	Gallons or gasoline gallon equivalents (GGE)	Amount of claim	CRN
а	Liquefied petroleum gas (LPG)		\$.183			419

Form 720 – Test Scenarios 6 Nontaxable Use of Alternative Fuel Gallons or gasoline Type of Amount of CRN Rate gallon use claim equivalents (GGE) "P Series" fuels b .183 420 Compressed natural gas c (CNG) (GGE = 126.67 421 .183 cu. Ft.) d Liquefied hydrogen .183 422 Any liquid fuel derived from coal (including e .243 423 peat) through the Fischer-Tropsch process Liquid fuel derived from f .243 424 biomass

Liquefied natural gas

Liquid gas derived from

g

h

(LNG)

biomass

7	Sales by Registered UltimateVendors of Undyed Diesel FuelFuel	Period of claim Registration Number		YYYYM YYYYM	
		Rate	Gallons	Amount of claim	CRN
a b	Use by a state or local government Use in certain intercity and local buse	\$.243 s .17	-		360 350

.243

.183

425

435

8	(Other Than Kerosene For Use	Period of c Registratio Number		YYYYMMDD- YYYYMMDD		
		Rate	Gallons	Amount of claim	CRN	
a	Use by a state or local government	\$.243	-		346	
b	Sales from a blocked pump	.243			346	
c	Use in certain intercity and local buse	es <u>.17</u>	-		347	

Sales by Registered Ultimate

 9 Vendors of Kerosene For Use in Aviation
 Registration Number

		Type of use	Rate	Gallons	Amount of claim	CRN
a	Use in commercial aviation (other than foreign trade) taxed at \$.219		\$.175			355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200			417
c	Nonexempt use in noncommercial aviation		.025			418
d	Other nontaxable uses taxed at \$.244		.243			346
e	Other nontaxable uses taxed at \$.219		.218			369
f	LUST tax on aviation fuels used in foreign trade		.001			433

10 Sales by Registered Ultimate Vendors of Gasoline

Registration Number

Registration

	venuors of Gusonne	1 (unito ci			
		Rate	Gallons	Amount of claim	CRN
a	Use by a nonprofit educational organization	\$.183			362
b	Use by a state or local government	.183			362

11 Sales by Registered Ultimate

	Vendors of Aviation Gasoline	Number			
		Rate	Gallons	Amount of claim	CRN
а	Use by a nonprofit educational organization	\$.193			324
b	Use by a state or local government	.193			324

12	Alcohol Fuel Mixture Credit	Period of c Registratio		YYYYMMDD- YYYYMMDD		
		Number Rate	Gal. of Alcohol	Amount of claim	CRN	
a	Alcohol fuel mixtures containing ethanol	\$.45	-		393	
b	Alcohol fuel mixtures containing alcohol (other than ethanol)	.60	-		394	
13	Biodiesel or Renewable Diesel Mixture Credit	Period of c Registratio Number		YYYYM YYYYM		
13		Registratio				
13 a		Registratio Number Rate	n Gal. of Biodiesel or Renewable	YYYYM Amount of	MDD	

14Alternative Fuel Credit and
Alternative Fuel Mixture CreditRegistration
Number

		Rate	Gallons or gasoline gallon equivalents (GGE)	Amount of claim	CRN
a	Liquefied petroleum gas (LPG)	\$.50			426
b	"P Series" fuels	.50			427
c	Compressed natural gas (CNG) (GGE = 121 cu. Ft.)	.50			428
d	Liquefied hydrogen	.50			429
e	Any liquid fuel derived from coal (including peat) through the Fischer- Tropsch process	.50			430
f	Liquid fuel derived from biomass	.50			431
g	Liquefied natural gas (LNG)	.50			432
h	Liquefied gas derived from biomass	.50			436
i	Compressed gas derived from Biomass (GCE = 121 cu.ft.)	.50			437

Form 720 – Test Scenarios 15 Other claims

Amount of **CRN** claim Section 4051(d) tire credit (tax on vehicle reported on 366 a IRS No. 33) Exported dyed diesel fuel (see Caution above line 1 on b 415 page 4) Exported dyed kerosene (see Caution above line 1 on 416 с page 4) Diesel-water fuel emulsion (see instructions) d Registered credit card issuers e Number of Tires Taxable tires other than bias ply or super single tires f 396 Taxable tires, bias ply or super single Tires designed for 304 g steering Taxable tires, super single Tires designed for steering h 305 i j k

			Amount of claim	CRN
	Total claims. Add all amounts on lines 1–15. Enter			
16	the result here and on page 2, Part III, line 4 of	16		
	Form 720.			

Form 6197 Test #1		Gas Gu	zzler Tax	TY 2011
Name:				
Taxpayer ic	lentification numbe	er:		
Number, street, and room:				
City or town, State, Zip code:				

Form 6197 Part I Computation of Tax

Line number		ne fuel eco (mpg) of utomobile type is:	f model	(d) Number of cars sold	(e) Tax due (multiply column I by column (d))	Line number		of	my (mpg) nodel type	(d) Number of cars sold	(e) Tax due (multiply column(c) by column (d))
	(a)	(b)	(c)				(a)	(b)	(c)		

Fo	rm 7	20 –	Test	Scen	arios						
	At least	But Less than	Tax rate			_	At least	But lI than	Tax rate		
1	22.5		\$0			7	16.5	17.5	\$3,000	2009	6027000.00
2	21.5	22.5	1,000	1054	1054000.00	8	15.5	16.5	3,700	203	751100.00
3	20.5	21.5	1,300	225	292500.00	9	14.5	15.5	4,500		
4	19.5	20.5	1,700	120	204000.00	10	13.5	14.5	5,400		
5	18.5	19.5	2,100	2	4200.00	11	12.5	13.5	6,400		
6	17.5	18.5	2,600	1	2600.00	12		12.5	7,700		
13					Add lines 720 on the						8335400.00

Form 6197 Part II Identification of Models Subject to Gas Guzzler Tax

Line no. from above	Fuel economy rating	No. of vehicles	Make, model name, and model year
			BMW M4 Coupe (2001, 2002, 2003, 2004, 2005,
2	21.5-22.5	1054	2006) BMW M6 Conv (2002, 2003, 2004, 2005,
			2006, 2007) BMW Z4 Roadster (2006, 2007)
			BMW M6 Conv (2002, 2003, 2004, 2005, 2006)
3	20.5-21.5	225	BMW 540 (2001) BMW 550 (2006, 2007) BMW
			650 (2006, 2007) BMW 645 (2005, 2006, 2007)
4	19.5-20.5	120	BMW 645 (2006, 2007) BMW 760 (2006, 2007)
5	18.5-19.5	2	BMW M5 (2000) BMW Z8 (2001)
6	17.5-18.5	1	BMW 750 (2001)
7	16.5-17.5	2009	BMW M6 (2007)
8	15.5-16.5	203	BMW M5 (2007)

F720 Test 2

Originator EFIN – as assigned Type -PractitionerPin EFIN – as assigned PIN

PinEnteredBy - n/a

SignatureOption – PIN Number –ReturnType - 720

TaxPeriodBeginDate –

TaxPeriodEndDate – Quarter End Date – 201103

–Filer

EIN - 111000003 Name – RRCN Red Corporation NameControl - RRCN USAddress – 2222 Red Lane Fairfax VA 22031

Officer

Name – James R Cook Title - President Phone – 70388899999 EmailAddress -DateSigned – self select TaxpayerPin – self select

Preparer

Name – Thomas Doe SSN or PTIN – 000000001 Phone -7038882555 EmailAddress -DatePepared –self select SelfEmployed – Y TaxYear - 2011 binaryAttachmentCount - 0

Form 720 Test #2 Qua	rterly Federal Excise Tax Return	TY 2011
----------------------	----------------------------------	---------

Name:	RRCN Red Corporation	
Taxpayer id	lentification number:	111000003
Number, str	eet, and room:	2222 Red Lane Fairfax
City or town	n, State, Zip code:	Fairfax VA 22031
Quarter end	ling:	3312011

Line	Data
Final return checkbox	
Address change checkbox	

_

FORM 720 - PART I

IRS No	Environmental Taxes (attach Form 6627)	Tax	IRS No
18	Domestic petroleum oil spill tax		18
21	Imported petroleum products oil spill tax		21
98	Ozone-depleting chemicals (ODCs)		98
19	ODC tax on imported products		19
IRS No	Communications and Air Transportation Taxes	Tax	IRS No
22	Local telephone service, toll telephone service, and teletypewriter exchange 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.
	60(a) - Diesel fuel, tax on removal at terminal rack		.244		
	60(b) - Diesel fuel, tax on taxable events				
60	other than removal at terminal rack		.244		60
	60 (c) - Diesel fuel, tax on sale or removal				
	of biodiesel mixture other than removal at		.244		
	terminal rack				
104	Diesel-water fuel emulsion		.198		104
105	Dyed diesel fuel, LUST tax		.001		105
107	Dyed kerosene, LUST tax		.001		107
119	LUST tax, other exempt removals (see instructions)		.001		119
	(a) Kerosene, tax on removal at terminal				
	rack (see instructions)		.244		
35	(b) Kerosene, tax on taxable events other		244		35
	than removal at terminal rack		.244		
69	Kerosene for use in aviation (see		.219		69
09	instructions)		.219		09
77	Kerosene for use in commercial aviation		.044		77
,,	(other than foreign trade)		.011		,,,
111	Kerosene for use in aviation, LUST tax on		.001		111
	nontaxable uses, including foreign trade				
79	Other fuels (see instructions)		104		79 (2
	(a) Gasoline, tax on removal at terminal rack(b) Gasoline, tax on taxable events other		.184		62
	than removal at terminal racI.184		.184		
62	(c) Gasoline, tax on sale or removal of				
	alcohol fuel mixture other than removal at		.184		
	terminal rack				
14	Aviation gasoline		.194		14
112	Liquefied petroleum gas (LPG)		.183		112
118	"P Series" fuels		.184		118
120	Compressed natural gas (CNG) (GGE =		.183		120
	126.67 cu. ft.)				
121	Liquefied hydrogen		.184		121
122	Any liquid fuel derived from coal (including		.244		122
123	peat) through the Fischer-Tropsch process Liquid fuel derived from biomass		.244		123
123	Liquefied natural gas (LNG)		.244		123
1 <i>4</i> 7	Enqueriou natural gas (Er(G)		.473		147

IRS No	Retail Tax	Rate	Tax	IRS No
33	Truck, trailer, and semitrailer chassis and bodies, and tractors	12% of sales price		33

IRS No 29	Ship Passenger Tax Transportation by water	ре	nber of rsons	Rate \$3 per person	Tax	IRS No 29	
IRS No 31	Other Excise Tax Obligations not in registered form		ount of gations	Rate .01	Tax	IRS No 31	
IRS No	Manufacturers Taxes	Number of tons	Sales price	Rate	Tax	IRS No	
36	Coal—Underground mined			\$1.10 per ton		36	
37	Coal—Underground mined			4.4% of sales price		37	
38	Coal—Surface mined			\$.55 per ton		38	
39	Coal—Surface mined			4.4% of sales price		39	
IRS No	Manufacturers Taxes				Tax	IRS No	
108	Taxable tires other than single tires (see instruct	tions)	•			108	
109	Taxable bias ply or sup than super single tires d (see instructions)					109	
113	Taxable tires, super sing steering (see instruction	-	igned for			113	
	anufacturers Taxes as guzzler tax. Attach Forn	n 6197. Che	eck if one-ti	me filing.	658	Tax 81700.00	
	anufacturers Taxes accines (see instructions)				Tax	IRS 97	

IRS No	Foreign Insurance Taxes	Premiums paid	Rate	Tax	IRS No
30	Policies issued by foreign insurers (see instructions) Casualty insurance and indemnity bonds Life insurance, sickness and		.04		30
	accident policies, and annuity contracts		.01		
	Reinsurance		.01		

1 Total. Add all amounts in Part I. Complete Schedule A unless 6581700–00 one-time filing

FORM 720 - PART II

IRS No		Rate	Tax	IRS No
41	Sport fishing equipment (other than fishing rods and fishing poles)	10% of sales price		41
110	Fishing rods and fishing poles (limits apply, see instructions)	10% of sales price		110
42	Electric outboard motors	3% of sales price		42
110	Fishing tackle boxes	3% of sales price		110
44	Bows, quivers, broadheads, and points	11% of sales price		44
106	Arrow shafts	\$.45 per shaft		106
140	Indoor tanning services	10% of amount paid		140

IRS No		Number of gallons	Rate	Tax	IRS No
64	Inland waterways fuel use tax		\$.20		64
125	LUST tax on inland waterways fuel use (see instructions)		.001		125
51	Alcohol sold as but not used as fuel (see instructions)				51
117	Biodiesel sold as but not used as fuel (see instructions)				117

IRS No	Floor Stocks Tax	Tax	IRS No
20	Ozone-depleting chemicals (floor stocks). Attach Form 6627.		20

2	Total. Add all amounts in Part II.	0.00

FORM 720 - PART III

3 4	Total tax. Add line 1, Part I, and line 2, Part II Claims (see instructions; complete Schedule C)	3 4	6581700.00
5	Deposits made for the quarter Check here if you used the safe harbor rule to	5	6581700.00
-	make your deposits.	-	
6	Overpayment from previous quarters	6	
7	Enter the amount from Form 720X included on line 6, if any	7	
8	Total of lines 5 and 6	8	6581700.00
9	Add lines 4 and 8	9	6581700.00
	Balance Due. If line 3 is greater than line 9, enter the difference. Pay the full amount with the return. Enclose		
10	Form 720-V with your check or money order for full amount payable to the "United States Treasury." Write your EIN, "Form 720," and the quarter on it	10	
11	Overpayment. If line 9 is greater than line 3, enter the difference. Check if you want the overpayment: Applied to your next return, Check if you want the overpayment: Refunded to you.	11	

FORM 720 - SCHEDULE A Schedule A Excise Tax Liability (see instructions)

1 Regular method taxes

(a) Record of Net Tax Liability			Period	
-		1st–15th day		16th–last day
First month	А	633900.00	В	1443600.00
Second month	С	1051800.00	D	830700.00
Third month	Е	767400.00	F	1854300.00
Special rule for September*			G	

(b) Net liability for regular method taxes. Add the amounts for each semimonthly period. 6581700.00

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

(a) Record of Taxes Considered as Collected		Period	
	1st–15th day		16th–last day
First month	М	Ν	
Second month	0	Р	
Third month	Q	R	
Special rule for September*		S	

(b) Alternative method taxes. Add the amounts for each semimonthly period. Complete only as instructed. See the instructions.

FORM 720 - SCHEDULE T Two-Party Exchange Information Reporting (see instructions)

Fuel	Number of gallons
Diesel fuel, gallons received in a two-party exchange within a terminal, included on IRS No. 60(a) on Form 720	
Diesel fuel, gallons delivered in a two-party exchange within a terminal	
Kerosene, gallons received in a two-party exchange within a terminal, included on IRS No. 35(a), 69, 77, or 111 on Form 720	
Kerosene, gallons delivered in a two-party exchange within a terminal	
Gasoline, gallons received in a two-party exchange within a terminal, included on IRS No. 62(a) on Form 720	
Gasoline, gallons delivered in a two-party exchange within a terminal	
Aviation gasoline, gallons received in a two-party exchange within a terminal, included on IRS No. 14 on Form 720	
Aviation gasoline, gallons delivered in a two-party exchange within a terminal	

Form 720 Schedule C - Claims

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

Month your income tax year ends

1	Nontaxable Use of Gasoli	oline Period of claim		claim	YYYYMMDD- YYYYMMDD	
		Type of use	Rate	Gallons	Amount of claim	CRN
a	Gasoline		\$.183			362
b	Exported		.184			411

2	Nontaxable Use of Aviatio Gasoline	on Pe	Period of claim			YYYYMMDD- YYYYMMDD	
		Type of use	Rate	Gallons	Amount of claim	CRN	
а	Used in commercial aviation (other than		\$.15			354	
b	foreign trade) Other nontaxable use		.193			324	
С	Exported		.194			412	
d	LUST tax on aviation fuels used in foreign trade		.001			433	

3	Nontaxable Use of Undyed Diesel Fuel	Pe	Period of claim			DD- DD
		Type of use	Rate	Gallons	Amount of claim	CRN
а	Nontaxable use		\$.243			360
b	Use in trains		.243			353
c	Use in certain intercity and local buses		.17			350
d	Use on a farm for farming purposes		.243			360
e	Exported		.244			413

Nontaxable Use of Undyed

	Nontaxable Use of Undyed Kerosene (Other Than Kerosene	Period of claim	YYYYMMDD-
-	Used in Aviation)		YYYYMMDD

		Type of use	Rate	Gallons	Amount of claim	CRN
а	Nontaxable use		\$.243			346
b	Use in certain intercity and local buses		.17			347
c	Use on a farm for farming purposes		.243			346
d	Exported		.244			414
e	Nontaxable use taxed at \$.044		.043			377
f	Nontaxable use taxed at \$.219		.218			369

5	Kerosene Used in Aviation	Period of claim			YYYYMMDD- YYYYMMDD	
		Type of use	Rate	Gallons	Amount of claim	CRN
а	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244		\$.200			346
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219		.175			355
С	Nontaxable use (other than use by state or local government) taxed at \$.244		.243			346
d	Nontaxable use (other than use by state or local government) taxed at \$.219		.218			369
e	LUST tax on aviation fuels used in foreign trade		.001			433

6

Gallons or gasoline Amount of Type of gallon Rate CRN claim use equivalents (GGE) Liquefied petroleum gas \$.183 419 a (LPG) b "P Series" fuels .183 420 Compressed natural gas c (CNG) (GGE = 126.67 .183 421 cu. ft.) d Liquefied hydrogen .183 422 Any liquid fuel derived from coal (including .243 423 e peat) through the Fischer-**Tropsch process** Liquid fuel derived from f .243 424 biomass Liquefied natural gas .243 425 g (LNG) Liquefied gas derived h .183 435 from biomass YYYYMMDD-Period of claim Sales by Registered Ultimate YYYYMMDD 7 Vendors of Undyed Diesel Fuel Registration Number A mount of

Nontaxable Use of Alternative Fuel

		Rate	Gallons	claim	CRN
a	Use by a state or local government	\$.243			360
b	Use in certain intercity and local buses	.17			350

8	Vendors of Undyed Kerosene	Period of claim Registration Number		YYYYMMDD- YYYYMMDD	
	•				
		Rate	Gallons	Amount of claim	CRN
a	Use by a state or local government	\$.243	_		346
b	Sales from a blocked pump	.243			346
c	Use in certain intercity and local buse	es <u>.17</u>	_		347

Sales by Registered Ultimate

	v 8
9	Vendors of Kerosene For Use in

9	Sales by Registered Ultima Vendors of Kerosene For Aviation	Use in	Registratio Number	on		
		Type of use	Rate	Gallons	Amount of claim	CRN
a	Use in commercial aviation (other than foreign trade) taxed at \$.219		\$.175			355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200			417
c	Nonexempt use in noncommercial aviation		.025			418
d	Other nontaxable uses taxed at \$.244		.243			346
e	Other nontaxable uses taxed at \$.219		.218			369
f	LUST tax on aviation fuels used in foreign trade		.001			433

10	Sales by Registered Ultimate Vendors of Gasoline	Registrati Number	on		
		Rate	Gallons	Amount of claim	CRN
а	Use by a nonprofit educational organization	\$.183			362
b	Use by a state or local government	.183			362

11	Sales by Registered Ultimate Vendors of Aviation Gasoline	Registrati Number	on		
		Rate	Gallons	Amount of claim	CRN
а	Use by a nonprofit educational organization	\$.193			324
b	Use by a state or local government	.193			324

CRN 393 394
393
394
1MDD- /IMDD
CRN
388
390
307

14Alternative Fuel Credit and
Alternative Fuel Mixture CreditRegistration
Number

426
427
428
429
430
431
432
436
437

15 Other claims

		Amount of claim	CRN
a	Section 4051(d) tire credit (tax on vehicle reported on IRS No. 33)		366
b	Exported dyed diesel fuel (see Caution above line 1 on page 4)		415
c	Exported dyed kerosene (see Caution above line 1 on page 4)		416
d	Diesel-water fuel emulsion (see instructions)		
e	Registered credit card issuers		
	Number of Tires		
f	Taxable tires other than bias ply or super single tires		396
g	Taxable tires, bias ply or super single tires designed for steering		304
h	Taxable tires, super single tires designed for steering		305
i			
j			
k			

			Amount of claim	CRN
16	Total claims. Add all amounts on lines 1–15. Enter the result here and on page 2, Part III, line 4 of Form 720.	16		

Form 6197 Test #2 Gas Gu			ızzler Tax	TY 2011
Name: RRCN Red Corporation				
Taxpayer identification number:		er:	111000003	
Number, str	eet, and room:		2222 Red Lane Fairfax	

Number, street, and room:	2222 Red Lane Fairfax
City or town, State, Zip code:	Fairfax VA 22031
Quarter ending:	3312011

Form 6197 Part I Computation of Tax

Line number		e fuel ecc (mpg) o itomobile type is: (b) But less than	f e model	(d) Number of cars sold	(e) Tax due (multiply column (c) by column (d))	Line number		of	omy (mpg) model type (c) Tax rate	(d) Number of cars sold	(e) Tax due (multiply column (c) by column (d))
1 2	22.5 21.5	22.5	\$0 1,000			7 8	16.5 15.5	17.5 16.5	\$3,000 3,700	96	288000.00
$\frac{2}{3}$	20.5	22.5 21.5	1,000			9	13.5 14.5	10.5	4,500		
4	19.5	20.5	1,700			10	13.5	14.5	5,400		
5	18.5	19.5	2,100	2997	6293700.00	11	12.5	13.5	6,400		
6	17.5	18.5	2,600			12		12.5	7,700		
13				-	Add lines 720 on the		0				6581700.00

Form 6197 Part II Identification of Models Subject to Gas Guzzler Tax

Line no. from above	Fuel economy rating	No. of vehicles	Make, model name, and model year
5	19.0	848	2007 Chrysler 300 SRT-8
5	19.0	1449	2007 Dodge Charger SRT-8
5	19.0	700	2007 Dodge Magnum SRT-8
7	17.118	96	2007 Dodge Viper

F720 Test 3

Originator EFIN – as assigned Type -PractitionerPin EFIN – as assigned PIN

PinEnteredBy - n/a

SignatureOption – Binary attachment 8453-EX

ReturnType - 720

TaxPeriodBeginDate – TaxPeriodEndDate – Quarter End Date – 201103

Filer

EIN - 111000000 Name – WCSM Cooperative & Sub NameControl - WCSM USAddress – 4567 Hickory Lane La Vergne TN 37086

Officer

Name – Stephen M Hoffman Title - President Phone – 6157938522 EmailAddress -DateSigned – self select TaxpayerPin – self select

Preparer

Name – Thomas Doe SSN or PTIN – -000000002 Phone -6157932222 EmailAddress -DatePepared –self select SelfEmployed – Y

TaxYear - 2011 binaryAttachmentCount -1 8453-EX Excise Tax Declaration for an IRS e-file Return

720 ATS Test #3	Quarterly Federal Excise Tax Return	TY 2011
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Name:	WCSM Cooperative & Sub	
Taxpayer identification number:		111000000
Number, street, and room:		4567 Hickory Lane
City or town, State, Zip code:		La Vergne TN 37086

Line	Data
Final return checkbox	
Address change checkbox	

FORM 720 - PART I

IRS No	Environmental Taxes (attach Form 6627)	Tax	IRS No
18	Domestic petroleum oil spill tax	629488.56	18
21 98	Imported petroleum products oil spill tax Ozone-depleting chemicals (ODCs)	81251704	21 98
19	ODC tax on imported products		19
IRS	Communications and Air Transportation Taxes	Tax	IRS No
No 22	Local telephone service, toll telephone service, and teletypewriter exchange service		22
26 28 27	Transportation of persons by air Transportation of property by air Use of international air travel facilities		26 28 27

IRS No	Fuel Taxes	Number of gallons	Rate	Tax	IRS No
	60(a) - Diesel fuel, tax on	25498305	.244		
60	removal at terminal rack	2017 0000		(221507.40	<i>c</i> 0
60	60(b) - Diesel fuel, tax on		044	6221586.40	60
	taxable events other than		.244		
	removal at terminal rack		.244		
	60 (c) – Diesel fuel, tax on sale or removal of biodiesel mixture		.244		
	other than removal at terminal				
	rack				
104	Diesel-water fuel emulsion		.198		104
105	Dyed diesel fuel, LUST tax	3152211	.001	3152.21	105
107	Dyed kerosene, LUST tax	0102211	.001	0102021	107
	LUST tax, other exempt				
119	removals (see instructions)		.001		119
	(a) Kerosene, tax on removal at	6570612	244		
	terminal rack (see instructions)	6579612	.244		
35	(b) Kerosene, tax on taxable			1605425.33	35
	events other than removal at		.244		
	terminal rack				
69	Kerosene for use in aviation		.219		69
07	(see instructions)		.217		07
	Kerosene for use in commercial		0.4.4		
77	aviation (other than foreign		.044		77
	trade)				
111	Kerosene for use in aviation,		.001		111
111	LUST tax on nontaxable uses, including foreign trade		.001		111
79	Other fuels (see instructions)				79
62	(a) Gasoline, tax on removal at			16005600.09	62
02	terminal rack	86986957	.184	10003000.07	02
	(b) Gasoline, tax on taxable			-	
	events other than removal at		.184		
	terminal rack				
	(c) Gasoline, tax on sale or]	
	removal of alcohol fuel mixture		.184		
	other than removal at terminal		.104		
	rack				
14	Aviation gasoline		.194		14
112	Liquefied petroleum gas (LPG)		.183		112
118	"P Series" fuels		.184		118
120	Compressed natural gas (CNG) (GGE = 126.67 cu. ft.)		.183		120
121	Liquefied hydrogen		.184		121

IRS No	Fuel Taxes		Number of gallons	Rate	Tax	IRS No
122	Any liquid fuel derived f coal (including peat) thro the Fischer-Tropsch proc	ough cess		.244		122
123	Liquid fuel derived from biomass			.244		123
124	Liquefied natural gas (Ll	NG)		.243		124
IRS No 33	Retail Tax Truck, trailer, and semi bodies, and tractors	trailer chas	ssis and	Rate 12% of sales price	Tax	IRS No 33
IRS No 29	Ship Passenger Tax Transportation by water	р	mber of ersons	Rate \$3 per person	Tax	IRS No 29
IRS No	Other Excise Tax		ount of igations	Rate	Tax	IRS No
31	Obligations not in registered form			.01		31
IRS No	Manufacturers Taxes	Number of tons	Sales price	Rate	Tax	IRS No
36	Coal—Underground mined			\$1.10 pe ton		36
37	Coal—Underground mined			4.4% of sales price		37
38	Coal—Surface mined			\$.55 per ton		38
39	Coal—Surface mined			4.4% of sales price		39

	IRS No	Manufacturers Taxes			Tax	IRS No	
	108	Taxable tires other than bias p single tires (see instructions)				108	
	109	Taxable bias ply or super sing than super single tires designe (see instructions)				109	
	113	Taxable tires, super single tire steering (see instructions)	es designed for			113	
IRS N 40		nufacturers Taxes guzzler tax. Attach Form 6197.	Check if one-tim	ne filing.		Tax	IRS No 40
	Ous	guzzier tax. Attach i orin 0197.		0 -			40
IRS N 97	lo Mar	ufacturers Taxes cines (see instructions)		<u> </u>		Tax	-
IRS N 97	lo Mar Vaco	ufacturers Taxes	Premiums	Rate	Tax	IRS	IRS No
IRS N 97	lo Mar Vaco	Dufacturers Taxes cines (see instructions) Foreign Insurance Taxes Policies issued by foreigninsurers (see instructions)Casualty insurance and			Tax		IRS No
IRS N 97	lo Mar Vaco	Dufacturers Taxes cines (see instructions) Foreign Insurance Taxes Policies issued by foreign insurers (see instructions)	Premiums	Rate	Tax	IRS	IRS No

FORM 720 - PART 2

IRS No		Rate	Tax	IRS No
41	Sport fishing equipment (other than fishing rods and fishing poles)	10% of sales price		41
110	Fishing rods and fishing poles (limits apply, see instructions)	10% of sales price		110
42	Electric outboard motors	3% of sales price		42
114	Fishing tackle boxes	3% of sales price		114
44	Bows, quivers, broadheads, and points	11% of sales price		44
106	Arrow shafts	\$.45 per shaft		106
140	Indoor tanning services	10% of amount paid		140

IRS No		Number of gallons	Rate	Tax	IRS No
64	Inland waterways fuel use tax		\$.20		64
125	LUST tax on inland waterways fuel use (see instructions)		.001		125
51	Alcohol sold as but not used as fuel (see instructions)				51
117	Biodiesel sold as but not used as fuel (see instructions)				117

IRS No Floor Stocks Tax

20 Ozone-depleting chemicals (floor stocks). Attach Form 6627.

IRS No 20

Tax

2 Total. Add all amounts in Part II.

FORM 720 - PART 3

3	Total tax. Add line 1, Part I, and line 2, Part II	3	25277769.65
4	Claims (see instructions; complete Schedule C)	4	
5	Deposits made for the quarter	5	30183990.00
	Check here if you used the safe harbor rule to		
	make your deposits.		
6	Overpayment from previous quarters	6	33120.00
7	Enter the amount from Form 720X included on line 6,	7	33120.00
/	if any	1	33120.00
8	Total of lines 5 and 6	8	30217110.00

9	Add lines 4 and 8	9	30217110.00
10	Balance Due. If line 3 is greater than line 9, enter the difference. Pay the full amount with the return. Enclose Form 720-V with your check or money order for full amount payable to the "United States Treasury." Write your EIN, "Form 720," and the quarter on it	10	
11	Overpayment. If line 9 is greater than line 3, enter the difference. Check if you want the overpayment: Applied to your next return, Check if you want the overpayment: Refunded to you. X	11	4939340.35

FORM 720 - SCHEDULE A Schedule A Excise Tax Liability (see instructions)

1 Regular method taxes

(a) Record of Net Tax Liability			Period	
·		1st–15th day		16th–last day
First month	А	4162192.08	В	4162192.08
Second month	С	4195055.46	D	4195055.46
Third month	E	4281637.29	F	4281637.28
Special rule for Septer	mber*		G	
(b) Net liability for reg each semimonthly per	0	taxes. Add the amou	ints for	25277769.65

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

(a) Record of Taxes Considered as Collected		Period	
	1st–15th day		16th–last day
First month	М	Ν	
Second month	0	Р	
Third month	Q	R	
Special rule for September*		S	

(b) Alternative method taxes. Add the amounts for each semimonthly period. Complete only as instructed. See the instructions.

FORM 720 - SCHEDULE T Two-Party Exchange Information Reporting (see instructions)

Fuel

Number of gallons

Diesel fuel, gallons received in a two-party exchange within a terminal, included on IRS No. 60(a) on Form 720 Diesel fuel, gallons delivered in a two-party exchange within a terminal Kerosene, gallons received in a two-party exchange within a terminal, included on IRS No. 35(a), 69, 77, or 111 on Form 720 Kerosene, gallons delivered in a two-party exchange within a terminal Gasoline, gallons received in a two-party exchange within a terminal, included on IRS No. 62(a) on Form 720 Gasoline, gallons delivered in a two-party exchange within a terminal Aviation gasoline, gallons received in a two-party exchange within a terminal Aviation gasoline, gallons received in a two-party exchange within a terminal, included on IRS No. 14 on Form 720 Aviation gasoline, gallons delivered in a two-party exchange within a terminal, included on IRS No. 14 on Form 720

Form 720 Schedule C - Claims

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

Month your income tax year ends

1	Nontaxable Use of Gasoli	ne Pe	eriod of c	claim	YYYYMMI YYYMMI	
		Type of use	Rate	Gallons	Amount of claim	CRN
а	Gasoline		\$.183			362
b	Exported		.184			411

2	Nontaxable Use of Aviation Gasoline	ation Period		claim	YYYYMMI YYYYMM	
		Type of use	Rate	Gallons	Amount of claim	CRN
a	Used in commercial aviation (other than foreign trade)		\$.15			354
b	Other nontaxable use		.193			324
с	Exported		.194			412
d	LUST tax on aviation fuels used in foreign trade		.001			433

3	Nontaxable Use of Undyed Diesel Fuel	Period of claim			YYYYMMDD- YYYYMMDD	
		Type of use	Rate	Gallons	Amount of claim	CRN
а	Nontaxable use		\$.243			360
b	Use in trains		.243			353
c	Use in certain intercity and local buses		.17			350
d	Use on a farm for farming purposes		.243			360
e	Exported		.244			413

Nontaxable Use of Undyed

4 Kerosene (Other Than Kerosene Period of claim Used in Aviation)

YYYYMMDD-YYYYMMDD

		Type of use	Rate	Gallons	Amount of claim	CRN
a	Nontaxable use		\$.243			346
b	Use in certain intercity and local buses		.17			347
c	Use on a farm for farming purposes		.243			346
d	Exported		.244			414
e	Nontaxable use faxed at \$.044		.043			377
f	Nontaxable use taxed at \$.219		.218			369

5	Kerosene Used in Aviation	n Pe	eriod of c	YYYYMMDD- YYYYMMDD		
		Type of use	Rate	Gallons	Amount of claim	CRN
a	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244		\$.200			346
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219		.175			355
с	Nontaxable use (other than use by state or local government) taxed at \$.244		.243			346
d	Nontaxable use (other than use by state or local government) taxed at \$.219		.218			369
e	LUST tax on aviation fuels used in foreign trade		.001			433

6	Nontaxable Use of Alternative Fuel					
		Type of use	Rate	Gallons or gasoline gallon equivalents (GGE)	Amount of claim	CRN
а	Liquefied petroleum gas (LPG)		\$.183			419
b	"P Series" fuels		.183			420

	Nontaxao	le Use (JI Alle	rnative Fu	el	
	Type use	1	Rate	Gallons or gasoline gallon equivalents (GGE)	Amount of claim	CRN
с	Compressed natural gas (CNG) (GGE = 126.67 cu. ft.)		183			421
d	Liquefied hydrogen Any liquid fuel derived		183			422
e	from coal (including peat) through the Fischer- Tropsch process		243			423
f	Liquid fuel derived from biomass		243			424
g	Liquefied natural gas (LNG)		243			425
h	Liquefied gas derived from biomass		183			435
7	Sales by Registered Ultimate Vendors of Undyed Diesel Fuel		od of c stratio ber		YYYYM YYYYM	
			Rate	Gallons	Amount of claim	CRN
a	Use by a state or local governmen	t S	\$.243	-		200
b	Use in certain intercity and local b	ouses	.17	-		360 350
	Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use	Perio	.17 od of c		YYYYM YYYYM	350 MDD-
	Sales by Registered Ultimate Vendors of Undyed Kerosene	Perio Regi Num	.17 od of c			350 MDD-
b 8 8 a b	Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use	Perio Regi Num	.17 od of c stratio ber	n	YYYYM Amount of	350 MDD- MDD

Nontaxable Use of Alternative Fuel

9	Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation		Registration Number)n		
		Type of use	f Rate	Gallons	Amount of claim	CRN
a	Use in commercial aviation (other than foreign trade) taxed at \$.219		\$.175			355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200			417
c	Nonexempt use in noncommercial aviation		.025			418
d	Other nontaxable uses taxed at \$.244		.243			346
e	Other nontaxable uses taxed at \$.219		.218			369
f	LUST tax on aviation fuels used in foreign trade		.001			433

10	Sales by Registered Ultimate Vendors of Gasoline	Registrati Number	on		
		Rate	Gallons	Amount of claim	CRN
а	Use by a nonprofit educational organization	\$.183			362
b	Use by a state or local government	.183			362

11	Sales by Registered Ultimate Vendors of Aviation Gasoline	Registration Number			
		Rate	Gallons	Amount of claim	CRN
а	Use by a nonprofit educational organization	\$.193			324
b	Use by a state or local government	.193			324

10		Period of c	laim	YYYYMMDD- YYYYMMDD	
12	Alcohol Fuel Mixture Credit	Registratio Number	n		
		Rate	Gal. of Alcohol	Amount of claim	CRN
a	Alcohol fuel mixtures containing ethanol	\$.45			393
b	Alcohol fuel mixtures containing alcohol (other than ethanol)	.60	-		394

13	Biodiesel or Renewable Diesel	Period of c	laim	YYYYMI YYYYM	
¹³ Mixture Credit		Registratio	n		
		Number			
		Rate	Gal. of Biodiesel or Renewable Diesel	Amount of claim	CRN
a	Biodiesel (other than agri-biodiesel) mixtures	\$1.00			388
b	Agri-biodiesel mixtures	1.00			390
c	Renewable diesel mixtures	1.00			307

14Alternative Fuel Credit and
Alternative Fuel Mixture CreditRegistration
Number

		Rate	Gallons or gasoline gallon equivalents (GGE)	Amount of claim	CRN
а	Liquefied petroleum gas (LPG)	\$.50			426
b	"P Series" fuels	.50			427
c	Compressed natural gas (CNG) (GGE = 121 cu. ft.)	.50			428
d	Liquefied hydrogen	.50			429
e	Any liquid fuel derived from coal (including peat) through the Fischer- Tropsch process	.50			430
f	Liquid fuel derived from biomass	.50			431
g	Liquefied natural gas (LNG)	.50			432
h	Liquefied gas derived from biomass	.50			436
i	Compressed gas derived from biomass (GGE = 121 cu.ft.)	.50			437

14 Other claims

		Amount of claim	CRN
а	Section 4051(d) tire credit (tax on vehicle reported on IRS No. 33)		366
b	Exported dyed diesel fuel (see Caution above line 1 on page 4)		415
c	Exported dyed kerosene (see Caution above line 1 on page 4)		416
d	Diesel-water fuel emulsion (see instructions)		
e	Registered credit card issuers		
	Number of Tires		
f	Taxable tires other than bias ply or super single tires		396
g	Taxable tires, bias ply or super single tires designed for steering		304
h	Taxable tires, super single tires designed for steering		305
i			
j k			

			Amount of claim	CRN
	Total claims. Add all amounts on lines 1–15. Enter			
16	the result here and on page 2, Part III, line 4 of	16		
	Form 720.			

Form 6627

Form 6627 Test #3	Environmental Taxes	TY 2011
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Name:	WCSN Cooperative & Sub		
Taxpayer identification number:		111000000	
Number, street, and room:		4567 Hickory Lane	
City or town, State, Zip code:		La Vergne TN 37086	

Form 6627 - Part I Tax on Petroleum

(a) Barrels	(b) Rate	(c) Tax	
			-

		(a) Barrels	(b) Rate	(c) Tax
1	Crude oil received at a U.S. refinery	7868607		
2	Crude oil taxed before receipt at refinery			
3	Taxable crude oil. Subtract line 2 from line 1. Multiply column (a) by column (b) and enter the amount of tax in column (c)	7868607	\$.08 bbl.	629488.56
4	Crude oil used in or exported from the U.S. before the tax was imposed. Multiply column (a) by column (b) and enter the amount of tax in column (c)		\$.08 bbl.	
5	Total domestic petroleum oil spill tax. Add lines 3 and 4, column (c). Enter the total here and on Form 720 on the line for IRS No. 18			629488.56
6	Imported petroleum products oil spill tax. Enter the number of barrels imported in column (a). Multiply column (a) by column (b) and enter the amount of tax in column (c). Also enter the amount on Form 720 on the line for IRS No. 21	10156463	\$.08 bbl.	812517.04

Form 6627 - Part II Tax on Ozone-Depleting Chemicals (ODCs), IRS No. 98

 \square

 \square

Elections. If you elect to report the tax on post-1989 ODCs at the time you sell or use a mixture containing such chemicals instead of when you make the mixture, check this box (the 1990 election)

If you elect to report the tax on post-1990 ODCs at the time you sell or use a mixture containing such chemicals instead of when you make the mixture, check this box (the 1991 election)

	(a) ODC	(b) Number of pounds	(c) Tax per pound (see Part II instructions)	(d) Tax (multiply column (b) by column (c))
1				
2				
3				
	Total ozone-depleting chem	icals tax. Add all a	mounts in column	
4	(d), include amounts from a here and on Form 720 on the	•		

Form 6627 - Part III - ODC Tax on Imported Products, IRS No. 19

Election. If you elect to report the tax on imported products at the time you import the products instead of when you sell or use the products, check this box

	(a) Imported product and the applicable ODC	(b) Number of products	(c) ODC weight of product	(d) Tax per pound	(e) Entry value	(f) Tax (see Part III instructions)
1						
2						
3						
	Total ODC tax on i	mported proc	lucts. Add all	amounts in	column (f),	
4	include amounts fro	om any additi	onal sheets. E	nter the tota	al here and	
	on Form 720 on the	•				

Form 6627 - Part IV - Tax on Floor Stocks of ODCs, IRS No. 20

	(a) ODC	(b) Number of pounds	(c) Tax per pound (see Part IV instructions)	(d) Tax (multiply column (b) by column (c))
1				
2				
3				
	Total floor stocks ta	x. Add all amounts	in column (d),	
4	include amounts fro	m any additional she	eets. Enter the	
	total here and on Fo	rm 720 on the line for	or IRS No. 20	

Exhibit 6- Tax Year 2011 2290 Test Scenarios

Exhibit 6- Tax Year 2011 2290 Test Scenarios

F2290	Schedule	1 test 1
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Originator EFIN: as assigned Type -PractitionerPIN EFIN: as assigned PIN: PINEnteredBy: Taxpayer SignatureOption: PIN Number ReturnType: 2290 FirstUsedDate: 201107 Filer EIN-111000004 Name: SGFN Transport NameControl - SGFN USAddress: 6 South Lake Court Antioch CA 90210 Officer Name: James R Cook Title: President Phone: 9253822121 EmailAddress: DateSigned: self select TaxpayerPIN: self select Preparer Name: Thomas Doe PT1N: P00000005 Phone - 9253822222 EmailAddress -DatePepared - self select SelfEmployed: Y TaxYear: 2011 binaryAttachmentCount - 0

IRS PAYMENT:

RTN: 011201526 ACCT #: 1234000000 TYPE OF ACCOUNT: Checking AMOUNT OF PAYMENT: 275 REQUESTED PAYMENT DATE: The "RequestedPaymentDate" in the IRS Payment Record must not be less than the "Received Date". Also, if the IRS Payment Record is present, the "Received Date" can not be a weekend date or FRB holiday TAXPAYER DAYTIME PHONE NUMBER: 9253822121

Form 2290 Schedule 1 Test #1	Heavy Highway Vehicle Use Tax Return	TY 2011
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Name:	SGFN Transport		
Taxpayer identification number:		111000004	
Number, street, and room:		6 South Lake Court	
City or town, State, Zip code:		Antioch CA 90210	

Line Description		Line Value	Write-in / Literal / Attachments
Amended Return Ch e-File only	neckbox for		
Form 2290, Amende Month for e-File only			
Address Change Ch	eckbox		
Final return checkbo	x		
Part I, Line 1, First U	Jsed	201107	
Part I, Line 2 - Tax. from Form 2290, pag		275.00	
Part I, Line 3, Addition Taxable Gross Weig Worksheet Attachme TGWIncreaseWorks	ht Increase ents Fixed =		
Part I, Line 4 - Total	Тах	275.00	
Part I, Line 5 Amour	nt		
Part I, Line 6 Amour	nt	275.00	
Part I, Line 6 EFTPS Checkbox	Payment		
Part II Line 7 - 5000	Miles Checkbox		
Part II, Line 7 - 7500 for agricultural vehic			
Part II, Line 8a, Not Tax Checkbox	Subject To The		
Part II, Line 8b, Vehi numbers	icle identification		
Part II, Line 9, Suspection number			
Part II, Line 9, Susp Were Sold Or Trans			
Part II, Line 9, Susp Were Sold Or Trans			

	Taxable Gross Weight	 (1) Annual tax (vehicles used during July) (a) (b) 		ring July) See the tables on page 10 of the instructions.)		(3) Number of Vehicles (a) (b)		(4) Amount of tax (col. (1) or (2) times col. (3))	Category
Category	(in pounds)	Vehicles Except Logging*	Logging Vehicles*	Vehicles Except Logging*	Logging Vehicles*	Vehicles Except Logging*	Logging Vehicles *		Cat
A B C D E F G H – J K L M N O P Q R S T U V	55,000 55,001 - 56,000 56,001 - 57,000 57,001 - 58,000 58,001 - 59,000 59,001 - 60,000 60,001 - 61,000 61,001 - 62,000 62,001 - 63,000 63,001 - 64,000 64,001 - 65,000 65,001 - 67,000 67,001 - 68,000 68,001 - 69,000 69,001 - 70,000 70,001 - 71,000 71,001 - 72,000 72,001 - 73,000 73,001 - 74,000 74,001 - 75,000 Totals. Add the number (this should be the same	total of taxable	vehicles shown	n on Scheduleb	1, Part II, line	2	2	275.00 \$275.00	A B C D E F G H I J K L M N O P Q R S T U V
	c). Add the amounts in c	olumn (4). Ente	er the total here	and on Form 2	2290, line 2				

W Tax-Suspended Vehicles (See Part II in the instructions.)

Form 2290, Schedule 1, Part I Vehicles on Which You Are Reporting Tax. Enter VIN and category.

	VIN	Category
1	1FUPBDB6PR5537422	V
2	CA213HP1731082348	V
3		
4		
5		

Form 2290, Schedule 1, Part II Summary of Reported Vehicles

 a. Total number of vehicles b. Enter the total number of taxable vehicles on which the tax is suspended 	a b	2
(category W) c. Total nuber of taxable vehicles. Subtract line b from line a	с	2

F2290 Schedule 1 test 2

Originator

EFIN: as assigned Type -PractitionerPIN EFIN: as assigned PIN

PINEnteredBy: Taxpayer

SignatureOption: PIN Number

ReturnType - 2290

FirstUsedDate: 201107

Filer

EIN- 111000011 Name: PMSN Cargo Transport NameControl - PMSN USAddress -23 North Avenue Reading PA 19610

Officer

Name: James R Cook Title - President Phone: 7035642121 EmailAddress -DateSigned: self select TaxpayerPIN: self select

Preparer

Name: Thomas Doe PT1N: P00000006 Phone -7035642222 EmailAddress -DatePepared -self select

SelfEmployed: Y

TaxYear - 2011

binaryAttachmentCount - 0

Form 2290 Schedule 1 Test #2	Heavy Highway Vehicle Use Tax Return	TY 2011
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Name:	PMSN Cargo Transport	
Taxpayer identification number:		111000011
Number, street, and room:		23 North Avenue
City or town, State, Zip code:		Reading PA 19610

Line Description	Line Value	Write-in / Literal / Attachments
Amended Return Checkbox for e- File only		
Form 2290, Amended Return as of Month for e-File only		
 Address Change Checkbox		
Final return checkbox		
Part I, Line 1, First Used	201107	
Part I, Line 2 - Tax. Enter the Total from Form 2290, page 2, column (4)	4024.50	
Part I, Line 3, Additional Tax - Taxable Gross Weight Increase Worksheet Attachments Fixed = TGWIncreaseWorksheet		
 Part I, Line 4 - Total Tax	4024.50	
Part I, Line 5 Amount		
Part I, Line 6 Amount	4024.50	
Part I, Line 6 EFTPS Payment Checkbox	X	
Part II Line 7 - 5000 Miles Checkbox		
Part II, Line 7 - 7500 miles or less for agricultural vehicles checkbox		
Part II, Line 8a, Not Subject To The Tax Checkbox		
Part II, Line 8b, Vehicle identification numbers		
Part II, Line 9, Suspended Vehicle identification numbers		
Part II, Line 9, Suspended Vehicles Were Sold Or Transferred To		
Part II, Line 9, Suspended Vehicles Were Sold Or Transferred On		

			ax (vehicles ing July)	vehicles fin July) See t page 1	l-period tax rst used after he tables on 0 of the ctions.)	(3) Nur Vehi		(4) Amount of tax (col. (1) or (2) times col. (3))	gory
Category	Taxable Gross Weight (in pounds)	(a) Vehicles Except Logging*	(b) Logging Vehicles*	(a) Vehicles Except Logging*	(b) Logging Vehicles*	(a) Vehicles Except Logging*	(b) Logging Vehicles *		Category
ABCDEFGHーJKLZOPQR	55,000 55,001 - 56,000 56,001 - 57,000 57,001 - 58,000 58,001 - 59,000 59,001 - 60,000 60,001 - 61,000 61,001 - 62,000 62,001 - 63,000 63,001 - 64,000 64,001 - 65,000 65,001 - 66,000 66,001 - 67,000 67,001 - 68,000 69,001 - 70,000 70,001 - 71,000 71,001 - 72,000	\$25.00 \$30.50 \$36.00 \$41.50 \$47.00 \$52.50 \$58.00 \$63.50 \$69.00 \$74.50 \$80.00 \$85.50 \$91.00 \$96.50 \$102.00 \$107.50 \$113.00 \$118.50	\$18.75 \$22.88 \$27.00 \$31.13 \$35.25 \$39.38 \$43.50 \$47.63 \$51.75 \$55.88 \$60.00 \$64.13 \$68.25 \$72.38 \$72.38 \$76.50 \$80.63 \$84.75 \$88.75			1		69.00	A B C D U F G F I J K L M N O P Q R
S T U	72,001 - 73,000 73,001 - 74,000 74,001 - 75,000	\$124.00 \$129.50 \$135.00	\$93.00 \$97.13 \$101.25			4		518.00	S T U
V	Over 75,000	\$137.50	\$103.13			25		3437.50	V
	Totals. Add the number (this should be the same c). Add the amounts in c	total of taxable	vehicles shown	n on Schedule	l, Part II, line	3	0	\$4024.50	

W Tax-Suspended Vehicles (See Part II in the instructions.)

Form 2290, Schedule 1, Part I Vehicles on Which You Are Reporting Tax. Enter VIN and category.

	VIN	Category
1.	1XP5DB9X1XN463492	V
2.	1XKWD89X8XR828981	V
3.	1XKWDB9X2YR852839	V
4.	1FVHAHAV03DK81663	V
5.	4V4NC9GH16N430536	V
6.	2HSCNAER5YC044891	Т
7.	1FUYDSEB9SH605922	Т
8.	1HSHBADNXSH612002	I
9.	4V4NC9GH16N430553	V
10.	4V4NC9GH56N430538	V
11.	1FUJA6CK15LN39534	V
12.	1FUJA6CK55LN39536	V
13.	4V4ND1RJ3YN789114	V
14.	1FUYDSEB5YPB82581	V
15.	1FUYDSEB3YPB82515	V
16.	1FUYSSEB0YLG56420	V
17.	1FUJA6CV25DN73986	Т
18.	1M1AA13Y6VW077873	V
19.	1FUYSSZB2WL887789	V
20.	4V4NC9GH91N308600	V
21.	1FUJAPCGX1LH74464	V
22.	1FUJA6CG75LN39484	V
23.	1FUJA6CGX5LN39432	V
24.	1FUJA6CG55LN47552	V
25.	1FUY1WEB51PF77396	V
26.	1FUYDSEB9RP770935	V
27.	1FUYDCYB7SH747218	V
28.	2HSFHAMR5XC066815	V
29.	2HSFHAMR4XC066840	Т
30.	1FUY1WEB31PF77395	V

Form 2290, Schedule 1, Part II Summary of Reported Vehicles

a. Total number of vehicles	a	30
b. Enter the total number of taxable vehicles on which the tax is suspended (category W)	D	30
c. Total nuber of taxable vehicles. Subtract line b from line a	С	30

F2290	Schee	dule 1	test 3
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Originator

EFIN: as assigned Type -PractitionerPIN EFIN: as assigned PIN

PINEnteredBy: Taxpayer

SignatureOption: PIN Number

ReturnType - 2290

FirstUsedDate: 201107

Filer

EIN- 111000012 Name: BSCN National Transport NameControl - BSCN USAddress: 4556 Oak Lane Fairfax VA 22035

Officer

Name: Thomas P Ship Title - President Phone - 7032953333 EmailAddress -DateSigned: self select TaxpayerPIN: self select

Preparer

Name: Thomas Doe PT1N: P00000007 Phone -7032959090 EmailAddress -

DatePepared - self select

SelfEmployed: Y

TaxYear - 2011

binaryAttachmentCount - 0

Form 2290 Schedule 1 Test #3	Heavy Highway Vehicle Use Tax Return	TY 2011

Name:	BSCN National Transport	
Taxpayer identification number:		111000012
Number, street, and room:		4556 Oak Lane
City or town, State, Zip code:		Fairfax VA 22035

Line Description	Line Value	Write-in / Literal / Attachments
Amended Return Checkbox for e-File only		
Form 2290, Amended Return as of Month for e-File only		
Address Change Checkbox		
 Final return checkbox		
 Part I, Line 1, First Used	201107	
Part I, Line 2 - Tax. Enter the Total from Form 2290, page 2, column (4)	9487.50	
Part I, Line 3, Additional Tax - Taxable Gross Weight Increase Worksheet Attachments Fixed = TGWIncreaseWorksheet		
Part I, Line 4 - Total Tax	9487.50	
 Part I, Line 5 Amount		
 Part I, Line 6 Amount	9487.50	
Part I, Line 6 EFTPS Payment Checkbox	Х	
 Part II Line 7 - 5000 Miles Checkbox		
Part II, Line 7 - 7500 miles or less for agricultural vehicles checkbox		
Part II, Line 8a, Not Subject To The Tax Checkbox		
Part II, Line 8b, Vehicle identification numbers		
Part II, Line 9, Suspended Vehicle identification numbers		
Part II, Line 9, Suspended Vehicles Were Sold Or Transferred To		
Part II, Line 9, Suspended Vehicles Were Sold Or Transferred On		

			tax (vehicles ing July)	vehicles fi July) See page	l-period tax rst used after the tables on 10 of the actions.)		mber of icles	(4) Amount of tax (col. (1) or (2) times col. (3))	gory
Category	Taxable Gross Weight (in pounds)	(a) Vehicles Except Logging*	(b) Logging Vehicles*	(a) Vehicles Except Logging*	(b) Logging Vehicles*	(a) Vehicles Except Logging*	(b) Logging Vehicles *		Category
) ABCDEFGHIJKLMNOPQRSTUV	55,000 55,001 - 56,000 56,001 - 57,000 57,001 - 58,000 58,001 - 59,000 59,001 - 60,000 60,001 - 61,000 61,001 - 62,000 62,001 - 63,000 63,001 - 64,000 64,001 - 65,000 65,001 - 66,000 66,001 - 67,000 67,001 - 68,000 68,001 - 69,000 69,001 - 70,000 70,001 - 71,000 71,001 - 72,000 72,001 - 73,000 73,001 - 74,000 74,001 - 75,000 Totals. Add the number of this should be the same c). Add the amounts in c	total of taxable	vehicles shown	n on Schedulet	o1, Part II, line	69	9	9487.50 \$9487.50	A B C D E F G H I J K L M N O P Q R S T U V
	Tor Coord dad Waltinla								

W Tax-Suspended Vehicles (See Part II in the instructions.)

Form 2290, Schedule 1, Part I Vehicles on Which You Are Reporting Tax. Enter VIN and category.

	Vehicles Identification Number	Category
1.	2FWJA6CG72AJ09169	V
2.	2FWJA6CG73AK81607	V
3.	2FWJA6CG23AK81613	V
4.	2FWJA6CG13AK81618	V
5.	2FWJA6CG13AK81621	V
6.	2FWJA6CG33AK81622	V
7.	2FWJA6CG53AK81623	V
8.	2FWJA6CG23AK81627	V
9.	2FWJA6CG43AK81628	V
10.	2FWJA6CG43AK81629	V
11.	2FWJA6CG43AK81630	V
12.	2FWJA6CG43AK81631	V
13.	2FWJA6CG43AK81633	V
14.	2FWJA6CG43AK81634	V
15.	2FWJA6CG43AK81637	V
16.	2FWJA6CG43AK81639	V
17.	2FWJA6CG43AK81640	V
18.	2FWJA6CG43AK81643	V
19.	2FWJA6CG43AK81645	V
20.	2FWJA6CG43AK81646	V
21.	2FWJA6CG43AK81647	V
22.	2FWJA6CG43AK81648	V
23.	2FWJA6CG43AK81651	V
24.	2FWJA6CG43AK81653	V
25.	2FWJA6CG43AK81654	V
26.	2FWJA6CG43AK81656	V
27.	3HSCNAMR53N064938	V
28.	3HSCNAMR73N064939	V
29.	5KJJAHCG83PK87322	V
30.	5KJJAHCG83PK87323	V
31.	5KJJAHCG83PK87324	V
32.	5KJJAHCG83PK87325	V
33.	5KJJAHCG83PK87326	V
34.	5KJJAHCG83PK87327	V
35.	5KJJAHCG83PK87328	V
36.	5KJJAHCG83PK87329	V
37.	5KJJAHCG83PK87330	V
38.	5KJJAHCG83PK87331	V
39.	2FWJA6CG32AJ09153	V
40.	2FWJA6CG32AJ09161	V
41.	2FWJA6CG62AJ09163	V
42.	2FWJA6CG3XAJ09165	V

Form 2290 - Test 3 Form 2290, Schedule 1, Part I Vehicles on Which You Are Reporting Tax. Enter VIN and category.

	Vehicles Identification Number	Category
43.	2FWJA6CG32AJ09168	V
44.	2FWJA6CG13AK81604	V
45.	2FWJA6CG03AK81626	V
46.	2FWJA6CG33AK81636	V
47.	2FWJA6CG13AK81652	V
48.	2FWJA6CG73AK81655	V
49.	3HSCNAMRX3N064935	V
50.	3HSCNAMR13N064936	V
51.	3HSCNAMR33N064937	V
52.	2FWJA6CG92AJ09156	V
53.	2FWJA6CG02AJ09157	V
54.	2FWJA6CG22AJ09158	V
55.	2FWJA6CG12AJ09166	V
56.	2FWJA6CG32AJ09167	V
57.	2FWJA6CG32AJ09170	V
58.	2FWJA6CG52AJ09171	V
59.	2FWJA6CG73AK81624	V
60.	2FWJA6CG93AK81625	V
61.	2FWJA6CG63AK81632	V
62.	2FWJA6CG13AK81635	V
63.	2FWJA6CG73AK81638	V
64.	2FWJA6CG73AK81641	V
65.	2FWJA6CG93AK81642	V
66.	2FWJA6CG23AK81644	V
67.	2FWJA6CG13AK81649	V
68.	2FWJA6CG83AK81650	V
69.	2FWJA6CG12AJ09152	V

Form 2290, Schedule 1, Part II Summary of Reported Vehicles

a. Total number of vehicles	а	69
b. Enter the total number of taxable vehicles on which the tax is suspended	b	
(category W)		69
c. Total nuber of taxable vehicles. Subtract line b from line a	c	0)

Exhibit 7 – Tax Year 2011 8849 Test Scenarios

Form 8849 with Schedule 1 - Test #1

Orignator

EFIN – as assigned Type -PractitionerPin EFIN – as assigned PIN

PinEnteredBy - n/a

SignatureOption – PIN Number

ReturnType - 8849

TYEndMonth -12

Filer

EIN - 111000005 Name – ESIN SVCS INC NameControl - ESIN USAddress – 2403 Green Lane Fairfax VA 22031

Officer

Name – James R. Cook Title - President Phone – 7036662121 EmailAddress -DateSigned – self select TaxpayerPin – self select

Preparer

Name – Thomas Doe SSN or PTIN – 000000008 Phone -7036662222 EmailAddress -DatePepared –self select SelfEmployed – Y

TaxYear – 2011 binaryAttachmentCount - 0

Form 8849 Test #1	Claim	for Refund of Excise Taxes	TY 2011	
Name: ESIN S	VCS INC			
Taxpayer identificatio	n number:	111000005		
Number, street, and room:		2403 Green Lane		
City or town, State, Zi	p code:	Fairfax VA 22031		
Schedule 1	Nontaxable	Use of Fuels	\bowtie	
Schedule 2	Schedule 2 Sales by Registered Ultimate Vendors			
Schedule 3				

Schedule 3	Certain Fuel Mixtures and the Alternate Fuel	Credit

- Section 4081(e) Claims Schedule 5
- Other Claims Schedule 6
- Registered Credit Card Issuers Schedule 8

Form 8849 Schedule 1 - Test #1

Form 8849 Schedule 1 - Test #1	Nontaxable Use of Fuels	TY 2011
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Name:	ESIN SVCS INC	
Taxpayer id	lentification number:	111000005
Number, street, and room:		2403 Green Lane
City or town	n, State, Zip code:	Fairfax VA 22031

Total refund (see instructions)		29,458.25
Period of claim: Enter month, day, and year in MMDDYYYY format.	From 10012011	To <i>10312011</i>

Form 8849 - Test 1 1 - Nontaxable Use of Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of refund Multiply col. (b) by col. (c)	(e) CRN
a	Gasoline (see Caution above line 1)	4	.183	30250	5535.75	362
b	Exported		.184			411

2 - Nontaxable Use of Aviation Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of refund Multiply col. (b) by col. (c)	(e) CRN
a	Use in commercial aviation (other than foreign trade)		.15	53042	7956.30	354
b	Other nontaxable use (see Caution above line 1)		.193			324
c	Exported		.194			412
d	LUST tax on aviation fuels used in foreign trade		.001			433

3 - Nontaxable Use of Undyed Diesel Fuel

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of refund Multiply col. (b) by col. (c)	(e) CRN
a	Nontaxable use		.243			360
b	Use on a farm for farming purposes		.243			360
c	Use in trains		.243			353
d	Use in certain intercity and local buses (see Caution above line 1)		.17			350
e	Exported		.244			413

Form 8849 - Test 1 4 - Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)

Exception. If any of the kerosene included in this claim did contain visible evidence of dye, attach a detailed explanation and check here

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of refund Multiply col. (b) by col. (c)	(e) CRN
a	Nontaxable use taxed at \$.244		.243			346
b	Use on a farm for farming purposes		.243			346
c	Use in certain intercity and local buses (see Caution above line 1)		.17			347
d	Exported		.244			414
e	Nontaxable use taxed at \$.044		.043			377
f	Nontaxable used taxed at \$.219		.218			369

5 - Kerosene Used in Aviation

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of refund Multiply col. (b) by col. (c)	(e) CRN
a	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244		.200	79831	15966.20	417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219		.175			355
c	Nontaxable use (other than use by state or local government) taxed at \$.244		.243			346
d	Nontaxable use (other than use by state or local governmnet) taxed at \$.219		.218			369
e	LUST tax on aviation fuels used in foreign trade		.001			433

6 - Nontaxable Use of Alternative Fuel

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of refund Multiply col. (b) by col. (c)	(e) CRN
a	Liquefied petroleum gas (LPG)		.183			419
b	"P Series" fuels		.183			420
c	Compressed natural gas (CNG) (GGE=126.67 cu. ft.)		.183			421
d	Liquefied hydrogen		.183			422

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of refund Multiply col. (b) by col. (c)	(e) CRN
e	Any liquid fuel derived from coal (including peat) through the Fischer-Tropsch process		.243			423
f	Liquid fuel derived from biomass		.243			424
g	Liquefied natural gas (LNG)		.243			425
h	Liquefied gas derived from biomass		.183			435

7 - Nontaxable Use of a Diesel-Water Fuel Emulsion

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of refund Multiply col. (b) by col. (c)	(e) CRN
a	Nontaxable use		.197			309
b	Exported		.198			306

8 - Exported Dyed Fuel and Gasoline Blendstocks

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of refund Multiply col. (b) by col. (c)	(e) CRN
a	Exported dyed diesel fuel and exported gasoline blendstocks taxed at \$.001		.001			415
b	Exported dyed kerosene		.001			416

Form 8849 with Schedule 2 - Test #2

Orignator

EFIN – as assigned Type -PractitionerPin EFIN – as assigned PIN

PinEnteredBy - n/a

SignatureOption – PIN Number

ReturnType - 8849

TYEndMonth –12

Filer

EIN - 111000006 Name – DSSN Self Services NameControl - DSSN USAddress – 2601 Yellow Road Moberly MO 65270

Officer

Name – James R Riley Title - President Phone – 6662632121 EmailAddress -DateSigned – self select TaxpayerPin – self select

Preparer

Name – Thomas Doe SSN or PTIN – 000000009 Phone -6662632222 EmailAddress -DatePepared –self select SelfEmployed – Y

TaxYear –2011 binaryAttachmentCount - 0

2011 Tax Exempt

	\$		
1/11	220.62	1	243.02
2	205.70	2	167.46
3	199.11	3	203.21
4	239.37	4	183.61
5	272.86	5	179.71
6	128.76	6	199.78
7	188.93	7	190.17
8	197.54	8	228.02
9	236.18	9	237.90
10	196.59	10	234.42
11	177.28	11	183.91
12	187.03	12	157.01
	2449.97		2408.22

Form 8849 with Schedule 2 - Test #2

Form 8849

Form 8849 with Schedule 2 - Test #2	Claim for Refund of Excise Taxes	TY 2011
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Name:	DSSN Self Services		
Taxpayer identification number:		111000006	
Number, street, and room:		2601 Yellow Road	
City or town, State, Zip code:		Moberly MO 65270	

Schedule 1	Nontaxable Use of Fuels	
Schedule 2	Sales by Registered Ultimate Vendors	\square
Schedule 3	Certain Fuel Mixtures and the Alternative Fuel Credit	
Schedule 5	Section 4081(e) Claims	
Schedule 6	Other Claims	
Schedule 8	Registered Credit Card Issuers	

Schedule 2, Form 8849

Form 8849 Schedule 2 - Test #2	Sales by Registered Ultimate Vendors	TY 2011	
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Name:	DSSN Self Services		
Taxpayer identification number:		111000006	
Number, street, and room:		2601 Yellow Road	
City or town, State, Zip code:		Moberly MO 65270	

Total refund (see instructions)		4,857.78	
Period of claim: Enter month, day, and year in MMDDYYYY format.	From 01012011	То 12312011	

Claimant's registration no.

UV	4321451598UV	Complete for lines 1a, 2a, 4a, 4b, 5a, and 5b. Also complete for lines 3d and 3e, type of use 14. Note: UV claimant must complete line 6 or 7 on page 3.
UB	4321451598UB	Complete for lines 1b and 2c.
UP	4321451598UP	Complete for line 2b.
UA	4321451598UA	Complete for line 3. See UV for lines 3d and 3e, type of use 14.

1 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

		(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
a	Use by a state or local government	.243	240	58.32	360
b	Use in certain intercity and local buses	.17	1764	299.88	350

Form 8849 - Test 2 2 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation)

		(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
a	Use by a state or local government	.243	2057	499.85	346
b	Sales from a blocked pump	.243	4115	<i>999.94</i>	346
C	Use in certain intercity and local buses	.17			347

3 Sales by Registered Ultimate Vendors of Kerosene for Use in Aviation

		Type of Use	(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
a	Use in commercial aviation (other than foreign trade) taxed at \$.219		\$.175	5714	999.95	355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200			417
c	Nonexempt use in noncommercial aviation		.025			418
d	Other nontaxable uses taxed at \$.244		.243			346
e	Other nontaxable uses taxed at \$.219		.218			369
f	LUST tax on aviation fuels used in foreign trade		.001			433

4 Sales by Registered Ultimate Vendors of Gasoline

		(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
a	Use by a nonprofit educational organization	.183	5464	999.91	362
b	Use by a state or local government	.183			362

5 Sales by Registered Ultimate Vendors of Aviation Gasoline

		(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
a	Use by a nonprofit educational organization	\$.193	5181	999.93	324
b	Use by a state or local government	\$.193			324

6 Government Unit Information

Taxpayer Identification No. 111000006 Name *Dally Self Service*

Gallons 120

7 Nonprofit Educational Organization and Government Unit Information

Taxpayer Identification No. 111000006 Name *Dally Self Service*

Gallons 120

Form 8849 with Schedule 3 - Test 3

Orignator

EFIN – as assigned Type -PractitionerPin EFIN – as assigned PIN

PinEnteredBy-n/a

SignatureOption – Binary attachment 8453-EX

ReturnType - 8849

TYEndMonth-02

Filer

EIN - 111000007 Name – EFAN Fuel Association NameControl - EFAN USAddress – 2403 Purple Avenue Osborne KS 67473

Officer

Name – James R Cook Title - President Phone – 7853462121 EmailAddress -DateSigned – self select TaxpayerPin – self select

Preparer

Name – Thomas Doe SSN or PTIN – 000000010 Phone -7853462222 EmailAddress -DatePepared –self select SelfEmployed – Y

TaxYear – 2011 binaryAttachmentCount - 2 8453-EX Excise Tax Declaration for an IRS e-file Return Model Certificate O (See below.)

Form 8849 with Schedule 3 - Test 3	Claim for Refund of Excise Taxes	TY 2011	
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Name:	EFAN Fuel Association		
Taxpayer identification number:111000007			
Number, str	reet, and room:	2403 Purple Avenue	
City or town	n, State, Zip code:	Osborne KS 67473	

Schedule 1 Schedule 2 Schedule 3 Schedule 5 Schedule 6 Schedule 8	Nontaxable Use of Fuels Sales by Registered Ultimate Vendors Certain Fuel Mixtures and the Alternative Fuel Credit Section 4081(e) Claims Other Claims Registered Credit Card Issuers	
Schedule 8	Registered Credit Card Issuers	

Form 8849 Schedule 3 - Certain Fuel Mixtures and the Alternative Fuel Credit

Form 8849 Schedule 3 - Test #3	Certain Fuel Mixtures and the Alternative Fuel Credit	TY 2011
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Name:	EFAN Fuel Association		
Taxpayer identification number:111000007			
Number, str	reet, and room:	2403 Purple Avenue	
City or town	n, State, Zip code:	Osborne KS 67473	

Total refund (see instructions)	1,715.35	
Claimant's registration no.	61334224	1 M, UV
Period of claim: Enter month, day, and year in MMDDYYYY format.	From 02012011	To 02282011

1 Alcohol Fuel Mixture Credit

		(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
a	Alcohol fuel mixtures containing ethanol Alcohol fuel mixtures	.45	1183	532.35	393
b	containing alcohol (other than ethanol)	.60			394

2 Biodiesel or Renewable Diesel Mixture Credit

		(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
a	Biodiesel (other than agri- biodiesel) mixtures	1.00	623	623.00	388
b	Agri-biodiesel mixtures	1.00			390
c	Renewable diesel mixtures	1.00			307

Form 8849 - Test 3 3 Alternative Fuel Credit and Alternative Fuel Mixture Credit

		(a) Rate	(b) Gallons or gasoline gallon equivalents (GGE)	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
a	Liquefied petroleum gas (LPG)	.50			426
b	"P Series" fuels	.50			427
c	Compressed natural gas (CNG)(GGE = 121 cu. ft.)	.50			428
d	Liquefied hydrogen	.50			429
e	Any liquid fuel derived from coal (including peat) through the Fischer-Tropsch process	.50			430
f	Liquid fuel derived from biomass	.50			431
g	Liquefied natural gas (LNG)	.50			432
h	Liquefied gas derived from biomass	.50	1120	560.00	436
i	Compressed gas derived from biomass (GCE = 121 cu. ft.)	.50			437

Use the following certificate for the line 2 entry.

Model Certificate O

CERTIFICATE FOR BIODIESEL

Certificate Identification Number:

(To support a claim related to biodiesel or a biodiesel mixture under section 6426 of the Internal Revenue Code.)

The undersigned biodiesel producer (*Producer*) hereby certifies the following under penalties of perjury:

1. Producer certifies that the biodiesel to which this certificate relates is monoalkyl esters of chain fatty acids derived from plant or animal matter that meets the requirements of the American Society of Testing and Materials D6751 and the registration requirements and fuel additives established by EPA under Section 211 of the Clean Air Act (42 U.S.C. Section 7545).

Producer certifies that the biodiesel to which this certificate relates is 1% biodiesel (other than agri-biodiesel). This certificate applies to 623 gallons of Biodiesel produced and used by the producer in the course of his trade or business.

Producer understands that fraudulent use of this certificate may subject producer, claimant, and parties making such fraudulent use of this certificate to a fine or imprisonment, or both, together with the costs of prosecution.

Producer's name, address, and employer identification number (EIN)

EFAN Fuel Association, 2403 Purple Ave, Osborne, KS 67473 11-1000007

- 2. ____
- ____

_ ___

Name, address, and EIN of person buying the biodiesel from Producer

3. _

Date and location of sale to buyer

- 4. This certificate applies to <u>gallons</u> of biodiesel.
- 5. Producer certifies that the biodiesel to which this certificate relates is:
 - __% Agri-biodiesel (derived solely from virgin oils)
 - __% Biodiesel other than agri-biodiesel

This certificate applies to the following sale:

- ____ Invoice or delivery ticket number
- ____ Total number of gallons of biodiesel sold under that invoice or delivery ticket number (including biodiesel not covered by this certificate)
- ____ Total number of certificates issued for that invoice or delivery ticket number
- 6. ____

Name, address, and employer identification number of reseller to whom certificate is issued (only in the case of certificates reissued to a reseller after the return of the original certificate)

7. __Original Certificate Identification Number (only in the case of certificates reissued to a reseller after return of the original certificate).

Producer is registered as a biodiesel producer with registration number ____. Producer's registration has not been suspended or revoked by the Internal Revenue Service.

Producer certifies that the biodiesel to which this certificate relates in monoalkyl esters of long chain fatty acids derived from plant or animal matter that meets the requirements of the American Society of Testing and Materials D6751 and the registration requirements for fuels and fuel additives established by EPA under section 211 of the Clean Air Act (42 U.S.C. 7545).

Producer understands that the fraudulent use of this certificate may subject Producer and all parties making any fraudulent use of this certificate to a fine or

imprisonment, or both, together with the costs of prosecution.

Printed or typed name of person signing this certificate

James R. Cook

Title of person signing

President

Signature and date signed

Form 8849 with Schedule 5 - Test 4

Orignator

EFIN – as assigned Type -PractitionerPin EFIN – as assigned PIN

PinEnteredBy-n/a

SignatureOption – PIN Number

ReturnType - 8849

TYEndMonth –12

Filer

EIN - 111000010 Name – WBCN Boat Company NameControl - WBCN USAddress – 1212 Blue Street North Beach MD 20714

Officer

Name – William R Smith Title - President Phone – 4102572121 EmailAddress -DateSigned – self select TaxpayerPin – self select

Preparer

Name – Thomas Doe SSN or PTIN – 000000011 Phone -4102572222 EmailAddress -DatePepared –self select SelfEmployed – Y

TaxYear – 2011 binaryAttachmentCount - 0

Form 8849 Schedule 5 - Test #4

Form 8849 with Schedule 5 - Test 4Claim for Refund of Excise Taxes	TY 2011
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Name:	WBCN Boat Company	
Taxpayer id	entification number:	111000010
Number, street, and room:		1212 Blue Street
City or town, State, Zip code:		North Beach MD 20714

Schedule 1	Nontaxable Use of Fuels	
Schedule 1	Nontaxable Use of Fuels	
Schedule 2	Sales by Registered Ultimate Vendors	
Schedule 3	Certain Fuel Mixtures and the Alternative Fuel Credit	
Schedule 5	Section 4081(e) Claims	\square
Schedule 6	Other Claims	
Schedule 8	Registered Credit Card Issuers	

Schedule 5, Form 8849 - Section 4081(e)

Form 8849 Schedule 5 - Test #4	Section 4081(e) Claimss	TY 2011
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Name:	WBCN Boat Company	
Taxpayer identification number:111000010		111000010
Number, street, and room:		1212 Blue Street
City or town, State, Zip code:		North Beach MD 20714

Total refund (see instructions)	1657.00
Claimant's registration no.	613342241 M

Part I Claim for Refund of Second Tax.

	Type of Fuel	(a) Amount of refund	(b) CRN
1	Gasoline	1657.00	362
2	Aviation gasoline		324
3	Diesel fuel		360
4	Kerosene		346
5	Diesel-water fuel emulsion		309
6	Dyed diesel fuel, dyed kerosene, and other exempt removals		303
7	Kerosene for use in aviation		369
8	Kerosene for use in commercial aviation (other than foreign trade)		355

Part II Supporting Information Required

(c) Type of fuel	(d)		
Enter line number	Date second tax liability	(e)	(f)
from	incurred	Gallons of fuel claimed	Amount of second tax paid
Part I.	Use MMDDYYYY format.		
1	06092011	10000	1657.00

Form 8849 - Test 4 (c) Type of fuel Enter line number Date second

from Part I.

(**d**) Date second tax liability incurred Use MMDDYYYY format.

(e) Gallons of fuel claimed

(f) Amount of second tax paid

Form 8849 with Schedule 6 - Test 5

Orignator

EFIN – as assigned Type -PractitionerPin EFIN – as assigned PIN

PinEnteredBy - n/a

SignatureOption –PIN Number ReturnType - 8849

TYEndMonth - 08

Filer

EIN - 111000008 Name – FSIN Services INC NameControl - FSIN USAddress – 3509 Orange Lane Glen Allan MS 38744

Officer

Name – Phil P Way Title - President Phone – 6628732121 EmailAddress -DateSigned – self select TaxpayerPin – self select

Preparer

Name – Thomas Doe SSN or PTIN – 000000012 Phone -6628732444 EmailAddress -DatePepared –self select SelfEmployed – Y

TaxYear – 2011 binaryAttachmentCount - 0

Form 8849	(with	Schedule	6)) -	Test #5
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Schedule 6 - Test 5Claim for Refund of Excise TaxesTY 2011
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Name:	FSIN Services INC	
Taxpayer id	entification number:	111000008
Number, str	eet, and room:	3509 Orange Lane
City or town	n, State, Zip code:	Glen Allan MS 38744

Schedule 1	Nontaxable Use of Fuels	
Schedule 2	Sales by Registered Ultimate Vendors	
Schedule 3	Certain Fuel Mixtures and the Alternative Fuel Credit	
Schedule 5	Section 4081(e) Claims	
Schedule 6	Other Claims	\square
Schedule 8	Registered Credit Card Issuers	

Schedule 6, Form 8849 - Other Claims

	49 Schedule 6 - Test #5	Other C	laims			TY 2011
Name:	FSIN Services	s INC				
Taxpayer i	dentification number	er:	111000008			
Number, st	treet, and room:		3509 Orange	e Lane		
City or tow	vn, State, Zip code:		Glen Allan N	MS 38744		
	Total refund	(total of]	lines 1–5)		752.10	
events	the earliest and included in this DYYYY forma	s claim. F		Earliest date 05212011	Latest 0 062220	

1	Tax Federal excise tax on undyed diesel fuel taxed at \$.244.	Amount of refund 752.10	CRN 310
2			
3			
4			
5			
6			
7			
8			

Use the space below for an explanation of each tax claimed.

Filed pursuant to IRS procedures for claiming refunds on federal excise taxes levied on fuel used to produce a diesel-water fuel emulsion containing at least 14% water. The emulsion additive is registered by a United States manufacturer under Section 211 of the Clean Air Act with the EPA.

16, 350 gallons x \$.046 = 752.10

Form 8849 with Schedule 8 - Test 6

Orignator

EFIN – as assigned Type -PractitionerPin EFIN – as assigned PIN

PinEnteredBy-n/a

SignatureOption -PIN NumberReturnType - 8849

TYEndMonth -12

Filer

EIN - 111000009 Name – SOCN Oil Company NameControl - SOCN USAddress – 5703 Red Oak Street Lander WY 82520

Officer

Name – Mary A Cook Title - President Phone – 3076662121 EmailAddress -DateSigned – self select TaxpayerPin – self select

Preparer

Name – James Doe SSN or PTIN – 000000013 Phone -3076662222 EmailAddress -DatePepared –self select SelfEmployed – Y

TaxYear – 2011 binaryAttachmentCount - 0

Form 8849 (with Schedule 8) - Test #6

Form 8849 with Schedule 8 - Test 6	Claim for Refund of Excise Taxes	TY 2011	
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Name:	SOCN Oil Company	
Taxpayer id	lentification number:	111000009
Number, str	reet, and room:	5703 Red Oak Street
City or town	n, State, Zip code:	Lander WY 82520

Schedule 1 Schedule 2 Schedule 3 Schedule 5 Schedule 6	Nontaxable Use of Fuels Sales by Registered Ultimate Vendors Certain Fuel Mixtures and the Alternative Fuel Credit Section 4081(e) Claims Other Claims	

Schedule 8, Form 8849 - Registered Credit Card Issuers

Form 8849 Schedule 8 - Test #6 Registered Credit Card Issuers	TY 2011

Name: SOCN Oil Company	
Taxpayer identification number:	111000009
Number, street, and room:	5703 Red Oak Street
City or town, State, Zip code:	Lander WY 82520

Total refund (see instructions)	629.88	
Claimant's registration no. CC	234-0	002851
Period of claim: Enter month, day, and year in MMDDYYYY format.	From 10012011	To 12012011

1 Sales of Undyed Diesel Fuel

	(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
Use by a state or local government	\$.243			360

2 Sales of Undyed Kerosene (Other Than Kerosene For Use in Aviation)

	(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
Use by a state or local government	\$.243			346

Form 8849 - Test 6 3 Sales of Kerosene for Use in Aviation

		(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
a	Use by a state or local government (kerosene taxed at \$.244)	\$.243			346
b	Use by a state or local government (kerosene taxed at \$.219)	.218			369

4 Sales of Gasoline

		(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
a	Use by a nonprofit educational organization	\$.183	3442	629.88	362
b	Use by a state or local government	.183			362

5 Sales of Aviation Gasoline

		(a) Rate	(b) Gallons	(c) Amount of refund Multiply col. (a) by col. (b)	(d) CRN
а	Use by a nonprofit educational organization	\$.193			324
b	Use by a state or local government	.193			324