IFTA CARRIER

THIS PORTION IS YOUR WORKSHEET TO USE IN COMPLETING YOUR ATTACHED TAX RETURN KEEP THIS WORKSHEET FOR YOUR RECORDS

SEE REVERSE FOR COMPLETION INSTRUCTIONS

		SEE KEV	ERSE FOR COM	IPLETION INSTRUC	THONS			
TAX REMITTER NUMBER:			. FO	R THE PERIOD ENDIN	IG:			
		ζAΤ	K RETURN CALCU	JLATION			JOMA	JNTS
1. Not Appli	cable	··			•			
2. Not Appli	cable					.		
3. Not Appli	cable							
4. Total Amo	unt Due or	Credit (Line 8	from Quarter	rly Summary)		•		
5. ADD DEBIT	BALANCE /	SUBTRACT CREDI	T BALANCE		•	.:		
6. Not Appli	cable	•			· ·			
7. Total Amo	unt Enclos	sed (Line 11 fro	om Quarterly S	Summary)				
			CALCULATED IN CHED TAX RETUI	THE ITEMS ABOVE N RN	IUST BE COPIED			
	NOTE:			KEPT UNTIL THEIR DESTR CH RECORDS WILL RESUL			Y THE	
		DETA	ACH AND RETUR	N THE BOTTOM POR	NOIT			
			IETA CAPRI	ER QUARTERLY R	FTHOM		•	
	GOVERNM NEWFOU	IENT OF JNDLAND		TO THE INTERNATIO		EMENT)	·—• ·	•
		BRADOR		BLE SECTIONS MU		ED		•
W	Departmen	t of Finance	PLEASE TYPE C	OR PRINT CLEARLY IN	1 INK			•
Int. ch	arged at a 1	rate of 0.014018109	% per day.	RETU	JRN DUE DATE:			
TAX REMITTER	NO.:							
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ALTER GLIGAT GOA GE G		
TAX REMITTER NO.:		
TAX REMITTER:		
		AMOUNTS
FOR THE PERIOD ENDING:	1. Not Applicable	
	2. Not Applicable	
	3. Not Applicable	
IF BUSINESS HAS BEEN DISCONTINUED DURING THE	4. Total Amount Due or Credit (Line 8 from Quarterly Summary)	
PERIOD, PLEASE SPECIFY:	5. ADD DEBIT BALANCE / SUBTRACT CREDIT BALANCE	
	6. Not Applicable	
YEAR MONTH DAY	7. Total Amount Enclosed (Line 11 from Quarterly Summary)	

CER	TIFI	$\cap A$	TIC	١N٠

CERTIFICATION.	•			
These statements are hereby certified to be correct to the best of my knowledge and belief of the undersigned. It is a on this return.	serious of	fense to make i	false statement	ts
SIGNATURE OF AUTHORIZED SIGNING OFFICER:	TITLE:			
AUTHORIZED SIGNING OFFICER (Please Print or Type):	DATE:			

TELEPHONE NUMBER OF AUTHORIZED SIGNING OFFICER: ___

PLEASE READ CAREFULLY

- A. Failure to file returns or remit the tax payable by the due date will result in interest and/or penalty being imposed.
- B. Cheques or money orders should be made payable to the Newfoundland Exchequer and forwarded to:

DEPARTMENT OF FINANCE
TAXATION AND FISCAL POLICY BRANCH
TAX ADMINISTRATION DIVISION
P.O. BOX 8720
ST. JOHN'S, NL
A1B 4K1

- C. The tax return must be properly signed by an authorized officer, director, or agent of the business and filed with the Minister not later than the end of the month following the period ending shown on the return.
- D. Interest on outstanding balances is charged at a rate of 0.01401810% per day. Where full payment is not made by the due date, an additional \$50.00 may be imposed.
- E. Record your tax remitter number, name, and tax program on the back of your cheque or money order
- F. If no tax due, a NIL return must be filed. Line 4 must always be completed.
- G. If your business has been discontinued during the period:
 - (a) A return should be filed and the tax due remitted for the period.
 - (b) The name of the sucessor, if any, should be forwarded to the Minister of Finance, within 15 days, along with your registration certificate for cancellation.
- H. Any inquiries may be forwarded to (709) 729 6297 or toll free 1-877-729-5136.

DEPARTMENT OF FINANCE TAXATION AND FISCAL POLICY BRANCH TAX ADMINISTRATION DIVISION P.O. BOX 8720 ST. JOHN'S, NL A1B 4K1

Jurisdiction	A bbreviation	Jurisdiction	Abbreviation	
Alabama	AL	New Brunswick	NB	
Alberta	AB	Newfoundland	NL	
Arizona	AZ	New Hampshire	NH	
Arkansas	AR	New Jersey	NJ	
British Columbia	ВС	New Mexico	NM	
California	CA	New York	NY	
Colorado	со	North Carolina	NC	
Connecticut	СТ	North Dakota	ND	
Delaware	DE	Nova Scotia	NS	
Florida	FL	Ohio	ОН	
Georgia	GA	Oklahoma	ОК	
Idaho	ID	Ontario	ON	
Illinois	IL ·	Oregon	OR	
Indiana	IN	Pennsylvania	PA	
lowa	IA	Prince Edward Island	PE	
Kansas	KS	Quebec	QC	
Kentucky	КҮ	Rhode Island	RI	
Louisiana	LA	Saskatchewan	SK	
Maine	ME	South Carolina	sc	
M anitoba	MB	South Dakota	SD	
Maryland	MD	Tennessee	TN	
Massachusetts	MA	Texas	тх	
M ichigan	MI	Utah	UT	
Minnesota	MN	Vermont	VT	
Mississippi	MS	Virginia	VA	
Missouri	MO	Washington	WA	
Montana	MT	West Virginia	wv	
Nebraska	NE	Wisconsin	WI	
Nevada	NV	Wyoming	WY	

INSTRUCTIONS FOR COMPLETING THE IFTA QUARTERLY FUEL TAX REPORT AND THE IFTA QUARTERLY FUEL TAX REPORT SUMMARY FOR PROVINCE OF NEWFOUNDLAND

Quarterly Fuel Use Tax Report (NOTE: Only complete for jurisdictions in which you travelled during the period)

- A. Type of Fuel Check the appropriate box in the column to indicate the type of fuel the report covers.
- B. Name and Address Enter the name and address of the licensee.
- C. IFTA Licence Account Number Enter your eleven digit IFTA License Number.
- D. Period being Reported Enter the quarterly period the report
- E. Total IFTA Kilometres Enter the total kilometres travelled in IFTA jurisdictions by all qualified motor vehicles in your fleet.
- F. Total Non-IFTA Kilometres Enter the total kilometres travelled in Non-IFTA jurisdictions by all qualified motor vehicles in your fleet.
- G. Total Kilometres Add together the amounts in E and F to determine total kilometres travelled.
- H. Total Litres Enter the total litres of fuel purchased in both IFTA and Non-IFTA jurisdictions for all qualified motor vehicles in your fleet.
- I. Average Fleet Kilometres per Litre Divide item G by item H Round to 2 places past the decimal.
- Column J Enter the name of the jurisdictions in which your vehicles travelled during the period. (Note: A jurisdiction followed by (sur) indicates that the rate is a surcharge for that jurisdiction)
- Column K Enter the tax rate and surcharge rate, if applicable, for the appropriate fuel type.
- Column L Enter the total kilometres for each IFTA jurisdiction for this fuel type only.
- Column M Enter the IFTA taxable kilometres for each IFTA jurisdiction. Trip permit kilometres are not considered taxable in any jurisdiction.
- Column N Enter your average kilometre per litre (kpl) from item I above.
- Column O Divide the amount in column M by the amount in Column N to determine the litres consumed in each IFTA jurisdiction.
- Column P Enter the total litres purchased in each IFTA jurisdiction.
- Column Q Subtract the amount in column P from the amount in Column O. If this is credit(Column P is greater than Column O) enclose the amount in brackets as this indicates an overage of fuel purchased.
- Column R Multiply the amount in column Q by the tax rate for that jurisdiction as reported in Column K to determine tax due or credit. Enclose any amount in brackets.

Column S - If you file late, compute interest on any tax due for each jurisdiction. Interest is compound on tax due from the due date of the report until the date payment is received. Multiply Column R by the applicable interest rate by the number of months which you are late. Reports must be postmarked by the due date indicated on the report.

Column T - For each jurisdiction add the amounts in Column R and Column S and enter the total dollar amount due or credit amount. Enclose any credit amount in brackets.

Subtotals - Add the amounts in Column T and enter on the Subtotal line. Add the amounts in Column T on the back of the report and enter in Subtotal From Reverse.

Total - The total for Column T is the difference of all credits and taxes due for all jurisdictions. Transfer the total for each fuel type reported to the corresponding lines 1 to 5 of the IFTA Quarterly Fuel Use tax Report Summary.

Quarterly Fuel Use Tax Report Summary

- Lines 1 to 5 Enter the total amount from Column T of Form Gas-40 Quarterly Fuel Use Tax Report, for each fuel type.
- Line 6 Enter the sum of lines 1 to 5.
- Line 7 Enter the amount of penalty if applicable. A penalty of \$50 or 10%, whichever is greater, is imposed for failure to file a report, for filing a late report or for under payment of taxes due.
- Line 8 Enter the sum of lines 6 and 7.
- Line 9 Enter the amount of credit from the previous returns that you are claiming. Do not enter more than the balance due shown on line 8. Any credit not claimed wil be carried over the next filing period.
- Line 10 Enter the sum of lines 8 and 9.
- Line 11 The amount on line 10 is a balance due, attach payment and enter amount of your remittance.
- Line 12 If line 10 is an overpayment, you may enter the amount you want refunded on this line. If you do not request a refund or the amount you request is less than an overpayment, the balance of the overpayment will appear as a credit on your account. Credit balances cannot be carried forward for more than eight quarters (two years) from the date earned.



QUARTERLY FUEL USE TAX REPORT SUMMARY INTERNATIONAL FUEL TAX ASSOCIATION (IFTA)

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Department of Finance
Tax Administration Division

PLEASE TYPE OR PRINT IN INK WHEN COMPLETING THIS FORM, AND FORWARD TO: TAX ADMINISTRATION DIVISION, DEPARTMENT OF FINANCE, P.O. BOX 8720, ST. JOHN'S, NL A1B 4K1

IFTA Licence Account Number
Period Being Reported

1.	DIESEL	
2.	GASOLINE	
3.	ETHANOL GASOHOL	:
4.	PROPANE	
5.	NATURAL GAS	
6.	SUBTOTAL (SUM OF LINES 1 TO 5)	
7.	PENALTY	
8.	TOTAL AMOUNT DUE OR CREDIT (SUM OF LINES 6 AND 7)	
9.	CREDITS AVAILABLE AND APPLIED TO THIS RETURN	
10.	TOTAL AMOUNT DUE OR OVERPAYMENT	
11.	AMOUNT OF YOUR REMITTRANCE	
12.	AMOUNT TO BE REFUNDED	

Attach a cheque or money order, made payable to NEWFOUNDLAND EXCHEQUER, for the amount of your remittance.

		mined this return, including accompanying schedules and lief, it is correct and complete.
Name(Print)	· · · · · · · · · · · · · · · · · · ·	Signature
Title	Date	Telephone No.

Use this form to summarize your Quarterly Fuel Tax Reports (IFTA), for all fuel usage. Please read the back for instructions on completing this report. Failure to file this report on or before the last date of the month following the end of the period being reported is a violation of the International Fuel Tax Agreement. A NIL tax return is required even if there are no taxable operations for the period. A copy of this report should be kept for your records.



GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

QUARTERLY FUEL USE TAX REPORT INTERNATIONAL FUEL TAX ASSOCIATION (IFTA)

Department of Finance

Tax Administration Division

A. T	ype of F	PLEASE TAX A	TYPE OR F DMINISTRATI	PRINT IN IN	NK WHEN . ON, DEPAR	COMPLETING THE	HIS FORM, AND ANCE, P.O. BOX	FORWARD TO 8720, ST. Jo	O: DHN'S, NL	A1B 4K1
ETH/ PROI	EL OLINE ANOL PANE URAL GA		ne and Ado	dress						
		Account N	umber		<u>·</u>	D. Period B	eing Reporte	d		·
E. Total IF	TA Kilome	etres + F. T. K	otal Non-IF7 Glometres			netres / H. To	•		Average F	Fleet KPL aal places
		+				,		=		· · · · · · · · · · · · · · · · · · ·
When cor	mputing inf	ormation for (columns L. t	o Q., Pleas	se round to	the nearest w	hole litre and k	ilometre.	· · · · · · · · · · · · · · · · · · ·	<u> </u>
J. Juris- diction	K. Tax Rate	L. Total Kilometres	M. Taxable Kilometres	N. KPL (from I)	O. Taxable Litres	P. Tax Paid Litres (Purchases)	O. Net Taxable Litres (O minus P)	R. Tax Due or (Credit) (Q times K)	S. Interest Due	T. Total Due or (Credit)
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PLEASE PREPARE A SEPARATE REPORT FOR EACH FUEL TYPE AND KEEP A COPY OF THE REPORT FOR YOUR RECORDS, READ THE ENCLOSED INSTRUCTIONS CAREFULLY.

REFER TO WWW.IFTACH.ORG FOR FULL TAX RATE MATRIX FOR ALL FUEL TYPES, EXCHANGE/CONVERSION RATES AND FOOTNOTES FROM THE JURISTICTIONS.

J. is- tion	K. Tax Rate	L. Total Kilometres	M. Taxable Kilometres	N. KPL (from 1)	O. Taxable Litres	P. Tax Paid Litres (Purchases)	Q. Net Taxable Litres (O minus P)	R. Tax Due or (Credit) (Q times K)	S. Interest Due	T. Total Due or (Credit)
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