



IFTA Special Fuel Authorization Tax Return

See next page for where to send this form.

A. Reporting period Year _____ Quarter _____ Account number _____		For validation only, 039-030-115-0000	
B. <input type="checkbox"/> No operations <input type="checkbox"/> Amended return <input type="checkbox"/> New address <input type="checkbox"/> Effective date <input type="checkbox"/> Late return <input type="checkbox"/> Name change <input type="checkbox"/> Cancel license <input type="checkbox"/> _____			
C. Name and address		Validated postmark date	
1 Beginning physical inventory		1	
2 Fuel received (total from Schedule A on page 2)		2	
3 Ending physical inventory		3	
4 Total accountable gallons (line 1 + line 2 - line 3)		4	
5 Tax-exempt gallons (total from Schedule B on page 2)		5	
6a IFTA taxable gallons	6a		
6b Non IFTA taxable gallons	6b		
6 Total taxable gallons (line 6a + line 6b)		6	
7 Washington power take-off credit gallons *		7	
8 Tax paid purchases (Schedule A, line A1)		8	
9 Net taxable or credit gallons (line 6 - line 7 - line 8)		9	
10 Special fuel tax (line 9 x \$.494)	10		
11 Penalty (line 10 x 10%)	11		
12 Sum of line 10 + line 11	12		
13 Interest (line 12 x 1%)	13		
14 Total fuel tax liability (line 12 + line 13)		14	
15 Previous payments (Amended returns only)		15	()
16 Sales tax owed or credit claimed (See instructions)		16	
17 Total adjustments (line 15 + line 16)		17	
18 If total of lines 14 - 17 is greater than zero, amount owed		18	
19 If total of lines 14 - 17 is less than zero, net refund amount		19	()
Printed name of person signing		Contact name (if different from person signing)	
Contact (Area code) telephone number	Contact (area code) fax number	Contact email address	

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Date and place **X** Signature REQUIRED

Please keep a copy of this tax return for your records.

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Name _____ Account number _____

Schedule A - Fuel purchased in Washington

A1	Gallons purchased tax paid	line 8, page 1	A1	
A2	Non-taxed diesel from Washington licensed suppliers or special fuel tax importers		A2	
A3	Other (explain)		A3	
Total fuel (add lines A1 through A3)		line 2, page 1		

Record of off-highway use by non-IFTA vehicles * *

A	Miles traveled in all jurisdictions		A	
B	Total gallons of fuel placed into vehicles in all jurisdictions		B	
C	Average miles per gallon (line A divided by line B)		C	
D	Miles traveled off Washington public roads		D	

Schedule B - Tax exempt Washington gallons used

B1	Washington off-highway gallons (used by non-IFTA qualified vehicles) *		B1	
B2	Non-highway equipment use		B2	
B3	Other (explain)		B3	
Total exempt (add lines B1 through B3)		line 5, page 1		

* Use line B1 to report only those off-highway gallons used in Washington by vehicles that are not reported on the IFTA tax return. This amount is computed by dividing Line D by Line C. Off-highway credit gallons for IFTA qualified vehicles (over 26,000 GVW or which have three axles regardless of weight) must be reported on the IFTA tax return.

* * Record the mileage and fuel totals for all vehicles that are not reported on the IFTA tax return.

If payment is enclosed, send this completed form and supporting documents to:

Prorate and Fuel Tax, Department of Licensing, PO Box 9048, Olympia, WA 98507-9048

If payment is not enclosed, send this completed form and supporting documents to:

Fuel Tax Unit, Department of Licensing, PO Box 9228, Olympia, WA 98507-9228 or fax to (360) 570-7829 or (360) 570-7839