

93107194



New York State Department of Taxation and Finance
MT-903-MN Highway Use Tax Return

Taxpayer ID number

[Empty box for Taxpayer ID number]

Period covered

Begin date (mm/dd/yy)

End date (mm/dd/yy)

[Empty box for Begin date]

[Empty box for End date]

Due date (mm/dd/yy)

[Empty box for Due date]

Name
Number and street or PO box
City, state, ZIP code

If there are any changes in your business name, ID number, mailing or business address, telephone number, or owner/officer information, complete Form DTF-95, Business Tax Account Update. To change only your address, use Form DTF-96, Report of Address Change for Business Tax Accounts. If you need a form, see Need help? in the instructions or visit our Web site at www.nystax.gov or call toll free 1 800 462-8100. From areas outside the U.S. and Canada, call (518) 485-6800.

US DOT #

Read instructions (Form MT-903-I) before filling out this return.

Payment: Make your check or money order payable in U.S. funds to:

COMMISSIONER OF TAXATION AND FINANCE

Write your taxpayer ID number, MT-903, and the period covered by this return on your check or money order.

Enter payment amount . . . [Empty box]

Mark an X in the box if you had no activity in New York State for this period, and enter "0" on line 3 below. No further entries are necessary; complete the Certification section below and mail.

Enter the total taxable miles traveled in New York State for this period by all vehicles . . . [Empty box]

Enter the total miles (including Thruway miles) traveled in New York State for this period by all vehicles . . . [Empty box]

Mark an X in the box to indicate filing method, which cannot be changed during the calendar year:

[ ] gross weight method [ ] unloaded weight method

If no highway use tax is due for this period, mark an X in one of the boxes below and enter "0" on line 3.

[ ] All miles reported by another (leased motor vehicles).
[ ] All motor vehicles are exempt (example: crane, mail, household goods, etc.)

1. Highway use tax schedule totals (First complete Schedule 1 or Schedule 2, or both, on back page and then enter final totals in boxes 1a and 1b below.)

Schedule 1 total tax

Schedule 2 total tax

Total highway use tax (add 1a and 1b)

1a. [Empty box] 1b. [Empty box] 1c. [Empty box]

2. Prior highway use tax overpayments to be applied (attach a copy of Form MT-927)

Note: Fuel use tax credits cannot be used to reduce highway use tax . . . . . 2. [Empty box]

3. Highway use tax due (subtract line 2 from line 1c) . . . . . 3. [Empty box]

4. Late filing penalty (see instructions) . . . . . 4. [Empty box]

5. Late filing interest (see instructions) . . . . . 5. [Empty box]

6. Highway use tax due (add lines 3, 4, and 5) . . . . . 6. [Empty box]

Certification: I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete.

Date Taxpayer's signature Official title Telephone number
Taxpayer's email address Paid preparer's email address
Date Print name of paid individual or firm preparing this return Signature of individual preparing this return Paid preparer's telephone number
Paid preparer's ID number Paid preparer's mailing address For office use only

Mail to: NYS TAX DEPARTMENT
RPC - HUT
PO BOX 15166
ALBANY NY 12212-5166

