



Form 105-32

Revised 3-2016

GDD

MAIL TO: OKLAHOMA TAX COMMISSION
2501 NORTH LINCOLN BOULEVARD
OKLAHOMA CITY, OK 73194

STATE OF OKLAHOMA - OKLAHOMA TAX COMMISSION
MOTOR FUEL TERMINAL OPERATOR MONTHLY REPORT

THIS REPORT IS DUE ON THE 27TH OF THE NEXT MONTH.

DST - 201

-OFFICE USE ONLY-

MONTHLY SUMMARY OF TRANSACTIONS FOR THE MONTH: _____.

--	--	--	--

Name of Terminal:				License Number:			
Physical Address of Terminal:		City:	State:	ZIP:	Operator: FEIN <input type="checkbox"/> SSN <input type="checkbox"/> (Check one, enter number below)		
Operator Name:							
Operator Address:		City:	State:	ZIP:	Terminal Code:		
<input type="checkbox"/> Check if address or name change		<input type="checkbox"/> Check if this is an amended Form 105-32		Filing Period:			

	DESCRIPTION	SCHD	GASOLINE	UNDYED DIESEL FUEL	DYED DIESEL FUEL	UNDYED BIODIESEL	DYED BIODIESEL	BLENDING MATERIAL	AVIATION GASOLINE	JET FUEL	E85	UNDYED KEROSENE	DYED KEROSENE
1	Beginning Inventory	15C											
2	Total Receipts	15A											
3	Total Gallons Available for Removal	CALC											
4	Total Disbursements	15B											
5	Gallons Available (Less Disbursements)	CALC											
6	Gain/Loss (Inventory Adjustment)	CALC											
7	Actual Ending Inventory	15C											

I/We declare under the penalties of perjury that this return including any accompanying schedules and statements has been examined by me/us and to the best of my/our knowledge and belief is a true, correct and complete return made in good faith for the taxable period stated, pursuant to any existing laws requiring the filing of this return.

Signed: _____ By: _____ Date: _____

Email Address: _____ Phone Number: _____

**MOTOR FUEL TERMINAL OPERATORS' MONTHLY REPORT
DST - 201**

INSTRUCTIONS

Due Date - 27th day of the next month - A report must be filed with respect to information for the preceding calendar month on or before the twenty-seventh day of the current month.

General Information - Complete all information at the top of the form including company name, address, Federal Identification or Social Security Number, telephone number, and month and year of report. Please type or clearly print all information. **Report whole gallons only.** Partial gallons should be rounded as follows: 500.4 = 500, 500.5 = 501.

LINE 1 - BEGINNING INVENTORY

The actual physical ENDING INVENTORY, by product, from the prior month.

LINE 2 - TOTAL RECEIPTS (DST-201, SCHEDULE 15A)

All fuel products received at the terminal by pipeline, transport truck, marine vessel, rail or barge shipment or by any other means.

LINE 3 - TOTAL GALLONS AVAILABLE FOR REMOVAL (LINE 1 + LINE 2)

The total of the Beginning Inventory (line 1) plus the Total Receipts (line 2). This represents the total gallons available for removal from the terminal (line 1 + line 2).

LINE 4 - TOTAL DISBURSEMENTS (DST-201, SCHEDULE 15B, PRODUCT CODES OTHER THAN 142, 160 AND 170)

Total disbursements of fuel other than Undyed Diesel Fuel, Undyed Biodiesel Fuel and Undyed Kerosene from the terminal.

LINE 5 - GALLONS AVAILABLE (LESS DISBURSEMENTS) (LINE 3 - LINE 4).

This should be the Book Inventory at the end of the month. Subtract Fuel Disbursements (line 4) from the Total Gallons Available for Removal (line 3).

LINE 6 - INVENTORY ADJUSTMENT (GAIN/LOSS)

Adjustment to balance the Book Inventory to the actual physical Ending Inventory (line 7). A loss should be indicated by entering the amount in parentheses (). Gains should be entered as positive numbers.

LINE 7 - ENDING INVENTORY

The actual physical ENDING INVENTORY taken at the end of the month. This figure will be carried forward to next month's BEGINNING INVENTORY.