

**STATE OF WEST VIRGINIA**  
**State Tax Department, Tax Account Administration Div**  
**P.O. Box 1682**  
**Charleston, WV 25326-1682**



\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

Account #: \_\_\_\_\_

WV/MFT-504  
rtL336 v.2

**WEST VIRGINIA MOTOR FUEL SUPPLIER/PERMISSIVE SUPPLIER REPORT**

**\*COMPLETE BACK OF RETURN FIRST\***

|  |           |  |                                  |                                      |
|--|-----------|--|----------------------------------|--------------------------------------|
| Period Ending:   | Due Date: | FINAL <input type="checkbox"/>                                   | AMENDED <input type="checkbox"/> | NO ACTIVITY <input type="checkbox"/> |
| <b>TOTAL TAX CALCULATION</b>   |           |  |                                  |                                      |
| 1. Grand Total Tax Due (Section 2 Line 1)  |           |  |                                  | .                                    |
| 2. Distributor Discount (Worksheet A - Total from Line 10)   |           |  |                                  | .                                    |
| 3. Administrative Discount (Line 1 multiplied by 0.001) <b>Only</b> if filed timely. Maximum of \$5,000  |           |  |                                  | .                                    |
| 4. Gross Amount Due (Line 1 minus Line 2 and Line 3)   |           |  |                                  | .                                    |
| 5. Default Payment (Tax previously defaulted then paid)  |           | Enter Distributor's Name:<br>(Use additional sheet if necessary) |                                  | .                                    |
| 6. Default Deduction (Amount not collected from Distributor/Importer)<br>Must have submitted a Notice of Tax Payment Default Notice (WV/MFT-512) |           |  |                                  | .                                    |
| 7. Total Amount Due (Line 4 plus Line 5 minus Line 6)  |           |  |                                  | .                                    |
| 8. Previous Month Credit   |           | Period Ended: _____ (MM/YY)                                      |                                  | .                                    |
| 9. Exporter Return Credit  |           | Period Ended: _____ (MM/YY)                                      |                                  | .                                    |
| 10. Total Credits (Line 8 plus Line 9)   |           |  |                                  | .                                    |
| 11. Net Amount Tax Due (Line 7 minus Line 10) If Line 10 is greater than Line 7, Enter 0   |           |  |                                  | .                                    |
| 12. NON-WAIVABLE INTEREST  |           |  |                                  | .                                    |
| 13. *ADDITIONS TO TAX (5% per month, not to exceed 25%; if no tax due \$50 per month)  |           |  |                                  | .                                    |
| 14. TOTAL TAX AND LATE FILING CHARGES DUE (Add Lines 11 through 13)  |           |  |                                  | .                                    |
| 15. Overpayment Amount (Line 10 minus Line 7) If Line 7 is greater than Line 10, Enter 0   |           |  |                                  | .                                    |
| 16. CREDIT (To take credit on next monthly return, enter the total from Line 15)   |           |  |                                  | .                                    |
| 17. REFUND (To obtain a refund, enter the total from Line 15)  |           |  |                                  | .                                    |

\* In addition to interest, a penalty of 5% per month (not to exceed 25%) is imposed if the return is late. Multiply Line 11 by 0.05 by the number of months late. Even if no tax is due, a late filing penalty of \$50 per month for each month or part of a month after the due date must be remitted.

**MAIL TO: WEST VIRGINIA STATE TAX DEPARTMENT**  
**Tax Account Administration Div**  
**P.O. Box 1682, Charleston, WV 25326-1682**  
**FOR ASSISTANCE CALL (304) 558-3333 TOLL FREE (800) 982-8297**  
**For more information visit our web site at: [www.tax.wv.gov](http://www.tax.wv.gov)**  
**File online at <https://mytaxes.wvtax.gov>**



0 0 9 0 7 1 7 0 1 W

**WEST VIRGINIA MOTOR FUEL SUPPLIER/PERMISSIVE SUPPLIER REPORT**

Account #: \_\_\_\_\_

This report and all required schedules must be completed and filed by the due date regardless of activity.

| SECTION 1 - SUPPLIER/PERMISSIVE SUPPLIER INFORMATION |                      |             |                        |                        |
|--|----------------------|-------------|------------------------|------------------------|
| Report in whole gallons                              | Gasoline             | Gasohol     | Undyed Diesel/Kerosene | Compressed Natural Gas |
| 1. Net Taxable Gallons (Worksheet A)                 | .00                  | .00         | .00                    | .00                    |
| 2. Tax Rate  | 0.3720               | 0.3720      | 0.3720                 | 0.2840                 |
| 3. Combined Rate Tax Due (Line 1 times Line 2)       | .                    | .           | .                      | .                      |
| Report in whole gallons                              | Dyed Diesel/Kerosene | Propane/LPG | Aviation Gas           | LNG/Other              |
| 4. Net Taxable Gallons at Var Rate (Worksheet A)     | .00                  | .00         | .00                    | .00                    |
|  |                      |             | <b>Aviation Jet</b>    |                        |
|  |                      |             | .00                    |                        |
| 5. Tax Rate  | 0.1670               | 0.0600      | 0.1670                 | **Enter tax rate       |
| 6. Variable Rate Due (Line 4 times Line 5)           | .                    | .           | .                      | .                      |
| 7. * Exempt Fuel at Flat Rate (Worksheet A)          |                      | .00         |                        |                        |
| 8. Flat Rate   |                      | 0.1500      |                        |                        |
| 9. * Tax Due - Exempt Fuel (Line 7 times Line 8)     |                      | .           |                        |                        |
| 10. Tax Due (Line 6 plus Line 9)                     | .                    | .           | .                      | .                      |

**SECTION 2 - TAX CALCULATION**

|   |   |
|---|---|
| 1. Grand Total Tax Due (Sum of Section 1 Line 3 and Line 10 all columns) Transfer Amount to Page 1 Line 1 | . |
|---|---|

\* Exempt Fuel (Gallons) Sold or Used for Taxable Purpose (on-highway)

\*\*Tax rate can be found at [www.tax.wv.gov](http://www.tax.wv.gov)

|  |
|--|
| Check if applicable: <input type="checkbox"/> Schedule 7A / 7B Attached  |
| <b>Sign your return</b>  |
| Under penalties of perjury, I declare that I have examined this return (including accompanying schedules and statements) and to the best of my knowledge and belief it is true and complete. I authorize the West Virginia State Tax Department to discuss this return with the preparer. <input type="checkbox"/> YES <input type="checkbox"/> NO |
| (Signature of Taxpayer) (Name of Taxpayer - Type or Print) (Title) (Date)  |
| (Person to Contact Concerning this Return) (Telephone Number) (Email Address)  |
| (Signature of preparer other than taxpayer) (Address) (Date)   |



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