Form **720** (Rev. April 2018)

Department of the Treasury Internal Revenue Service

Quarterly Federal Excise Tax Return

► See the Instructions for Form 720.

► Go to www.irs.gov/Form720 for instructions and the latest information.

OMB No. 1545-0023

Check I	here if:	Name	Quarter ending	FOR IRS USE (ONLY
☐ Fina	l return			Т		
☐ Addr	ess change	Number, street, and room or suite no.	Employer identification number	FF		
		(If you have a P.O. box, see the instructions.)		FD		
			FP			
		City or town, state or province, country, and ZIP or forei	1			
				Т		
Part I						
IRS No.	Environme	ntal Taxes (attach Form 6627)		Tax		IRS No.
18	Domestic p	etroleum oil spill tax				18
21	Imported pe	etroleum products oil spill tax				21

	Livioninental raxes (attach i offi 0027)			IUX	ino ivo.
18	Domestic petroleum oil spill tax				18
21	Imported petroleum products oil spill tax				21
98	Ozone-depleting chemicals (ODCs)				98
19	ODC tax on imported products				19
	Communications and Air Transportation Taxes (see instructi	ons)		Tax	
22	Local telephone service and teletypewriter exchange service				22
26	Transportation of persons by air				26
28	Transportation of property by air				28
27	Use of international air travel facilities				27
	Fuel Taxes	Number of gallons	Rate	Tax	
	(a) Diesel, tax on removal at terminal rack) l		
60	(b) Diesel, tax on taxable events other than removal at terminal rack				60
	(c) Diesel, tax on sale or removal of biodiesel mixture		[]		
	(not at terminal rack)		J		
104	Diesel-water fuel emulsion				104
105	Dyed diesel, LUST tax				105
107	Dyed kerosene, LUST tax				107
119	LUST tax, other exempt removals (see instructions)				119
35	(a) Kerosene, tax on removal at terminal rack (see instructions)		}		
	(b) Kerosene, tax on taxable events other than removal at terminal rack		J		35
69	Kerosene for use in aviation (see instructions)				69
77	Kerosene for use in commercial aviation (other than foreign trade)				77
111	Kerosene for use in aviation, LUST tax on nontaxable uses				111
79	Other fuels (see instructions)				79
	(a) Gasoline, tax on removal at terminal rack				
62	(b) Gasoline, tax on taxable events other than removal at terminal rack		J		62
13	Any liquid fuel used in a fractional ownership program aircraft				13
14	Aviation gasoline				14
112	Liquefied petroleum gas (LPG) (see instructions)				112
118	"P Series" fuels				118
120	Compressed natural gas (CNG) (see instructions)				120
121	Liquefied hydrogen				121
122	Fischer-Tropsch process liquid fuel from coal (including peat)				122
123	Liquid fuel derived from biomass				123
124	Liquefied natural gas (LNG) (see instructions)				124

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IRS No.

33	Retail Tax-Truck, trailer, and semitrailer chassis and bodies, and tractor								33
	Ship Passenger Tax			Number of p	persons	Rate		Tax	
29	Transportation by water								29
	Other Excise Tax		1	Amount of ob	ligations	Rate		Tax	
31	Obligations not in registered form								31
	Foreign Insurance Taxes - Policies issued by fe	oreign insu	irers	Premiums	s paid	Rate		Tax	IRS No.
	Casualty insurance and indemnity bonds						,		
30	Life insurance, sickness and accident policies	es, and an	nuity						
30	contracts	,	,				}		30
	Reinsurance							<u> </u>	
	Manufacturers Taxes	Number	of tons	Sales p	rice				
36	Cool Underground mined								36
37	Coal—Underground mined								37
38	Cool Surface mined								38
39	Coal – Surface mined								39
						Number of tire	s	Tax	IRS No.
108	Taxable tires other than bias ply or super sing	le tires							108
109	Taxable bias ply or super single tires (other than su		tires desia	ned for ste	erina)				109
113					3/				113
40					[7		40	
97	Vaccines (see instructions)						_		97
				Sales p	rice				
	Reserved for future use		1			2.3% of sales pr	ce		
1	Total. Add all amounts in Part I. Complete Sch	edule A u	nless one	-time filin	a		▶\$		
Part I	•								
			(a) A	anda a u da) Rate for				
	Patient - Centered Outcomes Research Fee	e (see	(a) Avg. nur						1
IRS No.	Patient - Centered Outcomes Research Fedinstructions)	e (see	of lives cov (see inst	ered	avg.	(c) Fee (se	e s)	Tax	IRS No.
IRS No.	instructions)	e (see	of lives cov	ered	avg.	(c) Fee (se	e s)	Тах	IRS No.
IRS No.		3 (300	of lives cov	ered	avg.	(c) Fee (se	e s)	Tax	IRS No.
IRS No.	instructions) Specified health insurance policies (a) With a policy year ending before October 1, 201	7	of lives cov	ered	avg.	(c) Fee (se	e s)	Тах	IRS No.
	instructions) Specified health insurance policies (a) With a policy year ending before October 1, 201 (b) With a policy year ending on or after October 1,	7	of lives cov	ered	avg.	(c) Fee (se	e s)	Тах	
133	instructions) Specified health insurance policies (a) With a policy year ending before October 1, 201 (b) With a policy year ending on or after October 1, and before October 1, 2018	7	of lives cov	ered	avg.	(c) Fee (se	e S)	Тах	133
	instructions) Specified health insurance policies (a) With a policy year ending before October 1, 201 (b) With a policy year ending on or after October 1, and before October 1, 2018 Applicable self - insured health plans	2017,	of lives cov	ered	avg.	(c) Fee (se	e e s)	Тах	
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133 41 110 42	instructions) Specified health insurance policies (a) With a policy year ending before October 1, 201 (b) With a policy year ending on or after October 1, and before October 1, 2018 Applicable self - insured health plans (c) With a plan year ending before October 1, 2017 (d) With a plan year ending on or after October 1, 2016 before October 1, 2018 Sport fishing equipment (other than fishing rods Fishing rods and fishing poles (limits apply, see Electric outboard motors Fishing tackle boxes	2017, and and fishing	of lives cov (see inst	ered	avg.	(c) Fee (se instruction	e e s)	Tax	133 41 110 42
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133 41 110 42 114 44 106	instructions) Specified health insurance policies (a) With a policy year ending before October 1, 201 (b) With a policy year ending on or after October 1, and before October 1, 2018 Applicable self - insured health plans (c) With a plan year ending before October 1, 2017 (d) With a plan year ending on or after October 1, 2017 (d) With a plan year ending on or after October 1, 2018 Sport fishing equipment (other than fishing rods Fishing rods and fishing poles (limits apply, see Electric outboard motors Fishing tackle boxes Bows, quivers, broadheads, and points Arrow shafts	2017, and and fishing	of lives cov (see inst	ered	avg.	(c) Fee (se instruction	e e s)	Tax	41 110 42 114 44 106
133 41 110 42 114 44 106 140	instructions) Specified health insurance policies (a) With a policy year ending before October 1, 201 (b) With a policy year ending on or after October 1, and before October 1, 2018 Applicable self - insured health plans (c) With a plan year ending before October 1, 2017 (d) With a plan year ending on or after October 1, 2016 Sport fishing equipment (other than fishing rods Fishing rods and fishing poles (limits apply, see Electric outboard motors Fishing tackle boxes Bows, quivers, broadheads, and points Arrow shafts Indoor tanning services	2017, and and fishing	of lives cov (see inst	ered co	avg.	(c) Fee (seinstruction	e e s)		133 41 110 42 114 44 106 140
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133 41 110 42 114 44 106 140 64 125	instructions) Specified health insurance policies (a) With a policy year ending before October 1, 201 (b) With a policy year ending on or after October 1, and before October 1, 2018 Applicable self - insured health plans (c) With a plan year ending before October 1, 2017 (d) With a plan year ending on or after October 1, 2 before October 1, 2018 Sport fishing equipment (other than fishing rods Fishing rods and fishing poles (limits apply, see Electric outboard motors Fishing tackle boxes Bows, quivers, broadheads, and points Arrow shafts Indoor tanning services Inland waterways fuel use tax LUST tax on inland waterways fuel use (see in	2017, and and fishing	g poles)	ered co	avg.	(c) Fee (seinstruction	e e s)		133 41 110 42 114 44 106 140 64 125
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133 41 110 42 114 44 106 140 64 125 51 117 20	instructions) Specified health insurance policies (a) With a policy year ending before October 1, 201 (b) With a policy year ending on or after October 1, and before October 1, 2018 Applicable self - insured health plans (c) With a plan year ending before October 1, 2017 (d) With a plan year ending on or after October 1, 2018 Sport fishing equipment (other than fishing rods Fishing rods and fishing poles (limits apply, see Electric outboard motors Fishing tackle boxes Bows, quivers, broadheads, and points Arrow shafts Indoor tanning services Inland waterways fuel use tax LUST tax on inland waterways fuel use (see in Section 40 fuels (see instructions)	2017, and and fishing the instructions	g poles) ions)	ered co	avg. vered life	(c) Fee (seinstruction	e s)		133 41 110 42 114 44 106 140 64 125 51 117

IRS No.

Tax

Rate

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Here Signature Type or print name below signature. ▶ Paid Preparer Use Only Firm's name Firm's address ▶ Date Title Title Title Title Telephone number ▶ Telephone number ▶ Check if self-employed Firm's EIN ▶ Phone no.	Part III										
Deposits made for the quarter ▶ 5	3 T	otal tax. Add Part I, line 1, and Part II, lin	e2				▶	3			
Check here if you used the safe harbor rule to make your deposits. 6 Overpayment from previous quarters . ▶ 6 7 Enter the amount from Form 720X included on line 6, if any ▶ 7 8 Add lines 5 and 6 ▶ 8 9 Add lines 4 and 8 ▶ 9 10 Balance Due. If line 3 is greater than line 9, enter the difference. Pay the full amount with the return (see instructions) ▶ 10 11 Overpayment. If line 9 is greater than line 3, enter the difference. Check if you want the overpayment: Applied to your next return, or Refunded to you. Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete the following. No Designee name ▶ Phone no. ▶ Personal identification number (PIN) ▶ No Designee name ▶ Phone no. ▶ Personal identification number (PIN) ▶ No Designee name ▶ Print/Type preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Paid Preparer Use Only Firm's name ▶ Firm's signature Print/Type preparer's name Preparer's signature Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name	4 (claims (see instructions; complete Sched	ule C)	. ▶	4						
6 Overpayment from previous quarters . ▶ 6	5 [eposits made for the quarter	▶ 5								
Third Party Designee Sign Here Print/Type preparer's name Preparer's Signature Print/Type preparer's name Preparer's Signature Print/Type preparer's name Preparer's signature Pinn's address ▶ Radd lines 5 and 6		Check here if you used the safe harbo	r rule to make your dep	osits.							
on line 6, if any ▶ 7 8 Add lines 5 and 6 ▶ 8 9 Add lines 4 and 8 ▶ 9 10 Balance Due. If line 3 is greater than line 9, enter the difference. Pay the full amount with the return (see instructions) ▶ 10 11 Overpayment. If line 9 is greater than line 3, enter the difference. Check if you want the overpayment: □ Applied to your next return, or □ Refunded to you. Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Designee name ▶ Phone no. ▶ Personal identification number (PIN) ▶ □ □ 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, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Print/Type preparer's name Preparer's signature Date Check □ if self-employed Firm's name ▶ Firm's address ▶ Phone no.	6 (Overpayment from previous quarters	▶ 6								
Add lines 5 and 6 ▶ 8 9 Add lines 4 and 8 ▶ 9 10 Balance Due. If line 3 is greater than line 9, enter the difference. Pay the full amount with the return (see instructions) ▶ 10 11 Overpayment. If line 9 is greater than line 3, enter the difference. Check if you want the overpayment: Applied to your next return, or Refunded to you. Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete the following. No Designee name ▶ Phone no. ▶ Personal identification number (PIN) ▶ No Designee name ▶ Phone no. ▶ Personal identification number (PIN) ▶ No Designee name ▶ Phone no. ▶ Personal identification of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Prim's and Prim's EIN ▶ Firm's address ▶ Phone no.	7 E	nter the amount from Form 720X include	ded								
9 Add lines 4 and 8	C	n line 6, if any	▶ 7								
Balance Due. If line 3 is greater than line 9, enter the difference. Pay the full amount with the return (see instructions) 10 11 Overpayment. If line 9 is greater than line 3, enter the difference. Check if you want the overpayment: Applied to your next return, or Refunded to you. Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Designee name ▶ Phone no. ▶ Personal identification number (PIN) ▶ 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, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Paid Preparer Use Only Print/Type preparer's name Preparer's signature Prim's name ▶ Firm's address ▶ Phone no.	8 A	dd lines 5 and 6		. ▶	8						
11 Overpayment. If line 9 is greater than line 3, enter the difference. Check if you want the overpayment:	9 A	dd lines 4 and 8					▶	9			
overpayment: ☐ Applied to your next return, or ☐ Refunded to you. Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete the following. ☐ No Designee name ► Phone no. ► Personal identification number (PIN) ► ☐ Personal identification number (PIN) ► ☐ Personal identification number (PIN) ► ☐ ☐ No Designee name ► Phone no. ► Personal identification number (PIN) ► ☐ ☐ ☐ No Designee name ► Phone no. ► Personal identification number (PIN) ► ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	10 B	alance Due. If line 3 is greater than line 9, enter the	he difference. Pay the full am	ount with	the retu	ırn (see instruct	tions) 🕨	10			
Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Designee name ▶ Phone no. ▶ Personal identification number (PIN) ▶ 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, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Paid Print/Type or print name below signature. ▶ Preparer's signature Date Check if self-employed Firm's name ▶ Firm's name ▶ Phone no.	11 C	verpayment. If line 9 is greater than line	3, enter the difference.	Check i	f you v	vant the					
Designee Designee name ▶ Phone no. ▶ Personal identification number (PIN) ▶ 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, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Print/Type or print name below signature. ▶ Telephone number ▶		verpayment: Applied to your next	return, or	unded t	o you.			11			
Sign Here 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, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature Type or print name below signature. Prone no. Personal identification number (Pility) In the personal identification number (P		2 Do you want to allow another percent to allow	iss this return with the IRS (see	instructio	ns)?		Yes	s. Complete	e the follow	ving. [No
Sign Here Date Title	Designe	Designee name ►	Phone no. ▶	•		Persona	identificat	tion number (PIN) ►		
Signature Type or print name below signature. ► Paid Preparer Use Only Firm's name Firm's address ► Pate Title Telephone number ► Pfirm's name Firm's address ► Phone no.	_									/ knowle	edge and
Paid Preparer Use Only Print/Type preparer's name Preparer's signature Preparer's signature Date Check ☐ if self-employed Firm's name Firm's EIN Phone no.	Here	Signature		Date		Tit	le				
Paid Preparer Use Only Firm's name ► Firm's address ► Phone no.		Type or print name below signature. ▶				Telepho	ne numb	er►			
Use Only Firm's name ► Firm's EIN ► Phone no.			Preparer's signature			Date		J00.1	if		
Firm's address ► Phone no.	-	1	<u> </u>				Firm's E	IN ▶			
5 700 /p 4 0040							Phone r	10.			

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Schedule A Excise Tax Liability (see instructions)

Note: You must complete Schedule A if you have a liability for any tax in Part I of Form 720. Don't complete Schedule A for Part II taxes or for a one-time filing of the gas guzzler tax.

1 Regular method taxes

(a) Record of Net				riod			
Tax Liability	1st-	1st-15th day		16th-last day			
First month	Α		В				
Second month	С		D				
Third month	E		F				
Special rule for Septem	ber* · · · ·		G				

- (b) Net liability for regular method taxes. Add the amounts for each semimonthly period.
- 2 Alternative method taxes (IRS Nos. 22, 26, 28, and 27)

(a) Record of Taxes			Peri	od			
Considered as Collected		1st-15th day			16th-last day		
First month	М			N			-
Second month	0			Р			
Third month	Q			R			
Special rule for Septem	nber* .		•	S			

(b) Alternative method taxes. Add the amounts for each semimonthly period.

Schedule T Two-Party Exchange Information Reporting (see instructions)

Fuel	Number of gallons
Diesel fuel, gallons received in a two-party exchange within a terminal, included on IRS No. 60(a) on Form 720	
Diesel fuel, gallons delivered in a two-party exchange within a terminal	
Kerosene, gallons received in a two-party exchange within a terminal, included on IRS No. 35(a), 69, 77, or 111 on Form 720	
Kerosene, gallons delivered in a two-party exchange within a terminal	
Gasoline, gallons received in a two-party exchange within a terminal, included on IRS No. 62(a) on Form 720	
Gasoline, gallons delivered in a two-party exchange within a terminal	
Aviation gasoline, gallons received in a two-party exchange within a terminal, included on IRS No. 14 on Form 720	
Aviation gasoline, gallons delivered in a two-party exchange within a terminal	

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^{*}Complete only as instructed (see instructions).

Schedule C Claims

Month your income tax year ends ▶

- Complete Schedule C for claims only if you are reporting liability in Part I or II of Form 720.
- Attach a statement explaining each claim as required. Include your name and EIN on the statement (see instructions).

Caution: Claimant has the name and address of the person(s) who sold the fuel to the claimant, the dates of purchase, and if exported, the required proof of export. For claims on lines 1a and 2b (type of use 13 and 14), 3c, 4b, and 5, claimant hasn't waived the right to make the claim.

1	Nontaxable Use of Gasoline Note: CRN is credit reference number. Period of claim ▶							
		Type of use	Rate	Gallons	Amount of claim	CRN		
а	Gasoline (see Caution above line 1)				\$	362		
b	Exported (see Caution above line 1)					411		
2	Nontaxable Use of Aviation Gasoline		Per	iod of claim ▶				
		Type of use	Rate	Gallons	Amount of claim	CRN		
а	Used in commercial aviation (other than foreign trade)				\$	354		
b	Other nontaxable use (see Caution above line 1)					324		
С	Exported (see Caution above line 1)					412		
d	LUST tax on aviation fuels used in foreign trade					433		
3	Nontaxable Use of Undyed Diesel Fuel		Per	iod of claim ▶	•	•		
	Claimant certifies that the diesel fuel did not contain visible Exception. If any of the diesel fuel included in this claim di e explanation and check here			ce of dye, atta	ach a detailed	.▶ □		
		Type of use	Rate	Gallons	Amount of claim	CRN		
а	Nontaxable use	31			\$	360		
b	Use in trains					353		
С	Use in certain intercity and local buses (see Caution above line 1)					350		
d	Use on a farm for farming purposes					360		
е	Exported (see Caution above line 1)					413		
4	Nontaxable Use of Undyed Kerosene (Other Than Kerosene	e Used in Aviat	ion) Peri	od of claim ►				
		contain visible		e of dye, atta	ch a detailed	.▶ □		
	Caution: Claims cannot be made on line 4 for kerosene sales from a blocked pump.	Type of use	Rate	Callana				
а	Nontaxable use			Gallons	Amount of claim	CRN		
b				Gallons	Amount of claim	CRN 346		
С	Use in certain intercity and local buses (see Caution above line 1)			Gallons				
الم	Use in certain intercity and local buses (see Caution above line 1) Use on a farm for farming purposes			Gallons		346		
d	Use on a farm for farming purposes Exported (see Caution above line 1)			Gallons		346 347		
a e	Use on a farm for farming purposes Exported (see Caution above line 1) Nontaxable use taxed at \$.044			Gallons		346 347 346		
-	Use on a farm for farming purposes Exported (see Caution above line 1) Nontaxable use taxed at \$.044 Nontaxable use taxed at \$.219				\$	346 347 346 414		
е	Use on a farm for farming purposes Exported (see Caution above line 1) Nontaxable use taxed at \$.044		Per	iod of claim	\$	346 347 346 414 377		
e f	Use on a farm for farming purposes Exported (see Caution above line 1) Nontaxable use taxed at \$.044 Nontaxable use taxed at \$.219	Type of use	Per Rate		\$	346 347 346 414 377		
e f	Use on a farm for farming purposes Exported (see Caution above line 1) Nontaxable use taxed at \$.044 Nontaxable use taxed at \$.219	Type of use		iod of claim ▶	\$	346 347 346 414 377 369		
e f 5	Use on a farm for farming purposes Exported (see Caution above line 1) Nontaxable use taxed at \$.044 Nontaxable use taxed at \$.219 Kerosene Used in Aviation (see Caution above line 1) Kerosene used in commercial aviation (other than foreign	Type of use		iod of claim ▶	\$ Amount of claim	346 347 346 414 377 369		
e f 5	Use on a farm for farming purposes Exported (see Caution above line 1) Nontaxable use taxed at \$.044 Nontaxable use taxed at \$.219 Kerosene Used in Aviation (see Caution above line 1) Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244 Kerosene used in commercial aviation (other than foreign	Type of use		iod of claim ▶	\$ Amount of claim	346 347 346 414 377 369 CRN		
e f 5	Use on a farm for farming purposes Exported (see Caution above line 1) Nontaxable use taxed at \$.044 Nontaxable use taxed at \$.219 Kerosene Used in Aviation (see Caution above line 1) Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244 Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219 Nontaxable use (other than use by state or local	Type of use		iod of claim ▶	\$ Amount of claim	346 347 346 414 377 369 CRN 417		

Form **720** (Rev. 4-2018)

6

orm 72	20 (Rev. 4-2018)					Page
6	Nontaxable Use of Alternative Fuel					
	Caution: There is a reduced credit rate for use in certain inte	rcity and loca	al buses	(type of use 5)	(see instructions).	
		Type of use	Rate	Gallons, or gasoline or diesel gallon equivalents	Amount of clain	n CRN
а	Liquefied petroleum gas (LPG) (see instructions)				\$	419
b	"P Series" fuels					420
С	Compressed natural gas (CNG) (see instructions)					421
d	Liquefied hydrogen					422
е	Fischer-Tropsch process liquid fuel from coal (including peat)					423
f	Liquid fuel derived from biomass					424
g	Liquefied natural gas (LNG) (see instructions)					425
h	Liquefied gas derived from biomass					435
7	Sales by Registered Ultimate Vendors of Undyed Diesel F			Period of claim	>	
7	Sales by Registered Offinate Vehicors of Orlayed Dieser R	-uei	Regi	stration number	▶	
	Claimant certifies that it sold the diesel fuel at a tax-excluded	d price, repaid	d the an	nount of tax to t	he buyer, or has ol	btained
	written consent of the buyer to make the claim. Claimant cert	tifies that the	diesel 1	fuel didn't conta	in visible evidence	of dye.
	Exception. If any of the diesel fuel included in this claim did	contain visib	le evide	ence of dye, atta	ch a detailed	
	explanation and check here					▶ ┌
			Rate	Gallons	Amount of clain	n CRN
а	Use by a state or local government				\$	360
b	Use in certain intercity and local buses					350
8	Sales by Registered Ultimate Vendors of Undyed Kerose	ne		Period of claim	>	
	(Other Than Kerosene For Use in Aviation)		Regi	stration number	>	
	Claimant certifies that it sold the kerosene at a tax-excluded	price, repaid	the am	ount of tax to th	e buyer, or has ob	tained the
	written consent of the buyer to make the claim. Claimant cert	tifies that the	kerose	ne didn't contai	n visible evidence	of dye.
	Exception. If any of the kerosene included in this claim did of	contain visible	e evider	nce of dye, attac	ch a detailed	
	explanation and check here					▶ [
			Rate	Gallons	Amount of clain	1 CRN
а	Use by a state or local government				\$	246
b	Sales from a blocked pump					346
С	Use in certain intercity and local buses					347
9	Sales by Registered Ultimate Vendors of Kerosene For Use	in Δviation	Regi	stration number		
	Oules by Hegistered Ordinate Vehicles of Refesence for Osc	III Aviation	i iegi	stration number		
	Claimant sold the kerosene for use in aviation at a tax-exclude					
	repaid the amount of tax to the buyer, or has obtained writte	n consent of	the buy	er to make the	claim. See the inst	ructions for
	additional information to be submitted.					
		Type of use	Rate	Gallons	Amount of clain	n CRN
а	Use in commercial aviation (other than foreign trade) taxed at \$.219				\$	355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244					417
С	Nonexempt use in noncommercial aviation					418
d	Other nontaxable uses taxed at \$.244					346
_	Other nontavable uses taxed at \$ 210					360

LUST tax on aviation fuels used in foreign trade 433

10 Sales by Registered Ultimate Vendors of Gasoline

Registration number ▶

Claimant sold the gasoline at a tax-excluded price and hasn't collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained written consent of the buyer to take the claim; and obtained an unexpired certificate from the buyer and has no reason to believe any information in the certificate is false. See the instructions for additional information to be submitted.

		Rate	Gallons	Amount of clai	m	CRN
а	Use by a nonprofit educational organization			\$		362
b	Use by a state or local government					302

11 Sales by Registered Ultimate Vendors of Aviation Gasoline

Registration number ▶

Claimant sold the aviation gasoline at a tax-excluded price and hasn't collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained written consent of the buyer to take the claim; and obtained an unexpired certificate from the buyer and has no reason to believe any information in the certificate is false. See the instructions for additional information to be submitted.

		Rate	Gallons	Amount of cla	im	CRN
а	Use by a nonprofit educational organization			\$		324
b	Use by a state or local government					024

12 Reserved for future use

Reserved for future use

Period of claim ► Registration number ►

		Rate	Gal. of biodiesel or	Amount of claim	CRN
		Hate	renewable diesel	Amount of claim	On the
а	Reserved for future use				
b	Reserved for future use				
С	Reserved for future use				
40			· · · · ·		

Reserved for future use

Registration number ▶

Reserved for future use

		Rate	Gallons, or gasoline or diesel gallon equivalents (see instructions)	diesel alents Amount of claim		CRN
а	Reserved for future use					
b	Reserved for future use					
С	Reserved for future use					
d	Reserved for future use					
е	Reserved for future use					
f	Reserved for future use					
g	Reserved for future use					
h	Reserved for future use					
i	Reserved for future use					

14	Other claims. See the instructions. For lines 14b and 14c, see the Caution above I	Amount of claim	CRN	
а	Section 4051(d) tire credit (tax on vehicle reported on IRS No. 33)	\$	366	
b	Exported dyed diesel fuel and exported gasoline blendstocks taxed at \$.001		415	
С	Exported dyed kerosene		416	
d	Diesel-water fuel emulsion			
е	Registered credit card issuers			
		Amount of claim	CRN	
f	Taxable tires other than bias ply or super single tires		\$	396
g	Taxable tires, bias ply or super single tires (other than super single tires designed for steering)			304
h	Taxable tires, super single tires designed for steering			305
i				
j				
k				
15	Total claims. Add amounts on lines 1 through 14. Enter the result here and on Form 720, Part	III, line 4. 15		

Form 720-V, Payment Voucher

Purpose of Form

Complete Form 720-V if you're making a payment by check or money order with Form 720, Quarterly Federal Excise Tax Return. We will use the completed voucher to credit your payment more promptly and accurately, and to improve our service to you.

If you have your return prepared by a third party and a payment is required, provide this payment voucher to the return preparer.

Don't file Form 720-V if you're paying the balance due on line 10 of Form 720 using EFTPS.

Specific Instructions

Box 1. If you don't have an EIN, you may apply for one online by visiting www.irs.gov/EIN. You may also apply for an EIN by faxing or mailing Form SS-4, Application for Employer Identification Number, to the IRS. However, if you're making a one-time filing, enter your social security number.

- **Box 2.** Enter the amount paid from line 10 of Form 720.
- **Box 3.** Darken the circle identifying the quarter for which the payment is made. Darken only one circle.
- **Box 4.** Enter your name and address as shown on Form 720.
- Enclose your check or money order made payable to "United States Treasury." Be sure to enter your EIN (SSN for one-time filing), "Form 720," and the tax period on your check or money order. Don't send cash. Don't staple this voucher or your payment to the return (or to each other).
- Detach the completed voucher and send it with your payment and Form 720. See *Where To File* in the Instructions for Form 720.

▼ Detach here and mail with your payment and Form 720. ▼							Form 720-V (2018)		
720-V				Payment Voucher		OMB No. 1545-0023			
			▶ Don't staple or attach this voucher to your payment.		2018				
Enter your employer identification number (EIN) (see instructions).			Enter the amount of your payment. ► Make your check or money order payable to "United States Treasury."			Cents			
3 Tax Period				4 Enter your business name (individual name if sole proprietor).					
\bigcirc	1st Quarter		3rd Quarter	Enter your address.					
	2nd Quarter	0	4th Quarter	City or town, state or province, country, and ZIP or foreign postal	code.				