



# Instructions For Handwritten Forms

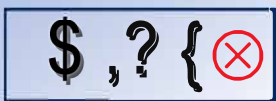
## Guidelines



Do not use red ink. Use blue or black ink.



Do not use dollar signs, commas, or other punctuation marks.



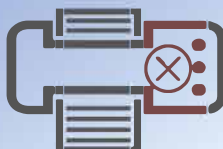
## Printing



Set page scaling to "none." The Auto-Rotate and Center checkbox should be unchecked.



Do not select "print on both sides of paper."



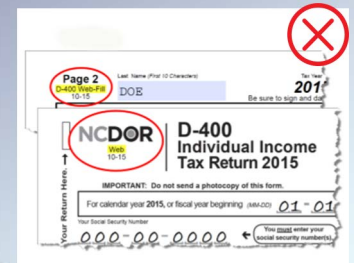
## Before Sending



Do not submit photocopies of returns. Submit originals only.



Do not mix form types.



# GAS-1254 Bulk End-User of Alternative Fuel

Legal Name (First 30 Characters) (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)

Trade Name \_\_\_\_\_

Street Address \_\_\_\_\_ County \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code (First 5 digits) \_\_\_\_\_

Name of Contact Person \_\_\_\_\_ Phone Number ( ) \_\_\_\_\_ Fax Number ( ) \_\_\_\_\_

**Fill in applicable circles:**

Address has changed since prior return

First time filing GAS-1254

Amended return

Final return for closed business

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**FEIN or SSN**

\_\_\_\_\_

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**Return for Quarter Ending**

March 31 \_\_\_\_\_ Year

June 30 \_\_\_\_\_

September 30 \_\_\_\_\_

December 31 \_\_\_\_\_

**Persons required to file this return:** Any person who maintains storage facilities for propane, natural gas, or other alternative fuels and dispenses part or all of the fuel for highway purposes.

## Part 1. Gallonage Accountability

		Column A Tax-paid Gallons Storage	Column B Gallons from Common Storage
1. Beginning inventory of gallons of alternative fuel on hand at first day of the quarter	▶ 1.	_____ .0	_____ .0
2. Total bulk gallons of alternative fuel purchased during the quarter (From Part 3)	▶ 2.	_____ .0	_____ .0
3. Total receipts of alternative fuel from other than bulk	▶ 3.	_____ .0	_____ .0
4. Alternative fuel gallons withdrawn from bulk storage and used in a highway vehicle (From Part 4, Line 4)	▶ 4.	_____ .0	_____ .0
5. Gallons sold to others for highway use	▶ 5.	_____ .0	_____ .0
6. Gallons sold or used for non-highway use	▶ 6.	_____ .0	_____ .0
7. Gains or losses (Add Lines 1 through 3 then subtract Lines 4, 5, 6, and 8)	7.	_____ .0	_____ .0
8. Ending inventory of alternative fuel on hand at end of the quarter	▶ 8.	_____ .0	_____ .0

## Part 2. Computation of Tax

9. Total gallons subject to road and inspection taxes (From Column B, add Lines 4, and 5)	9.		_____ .0
10. Alternative fuel road tax due (Multiple Line 9 by applicable road tax rate )	10.		_____ .
11. Alternative fuel inspection tax due (Multiple Line 9 by \$0.0025)	11.		_____ .
12. Adjustments (Attach explanation)	▶ 12.		_____ .
13. Net road and inspection taxes due (Add Lines 10, 11, and 12)	13.		_____ .
14. Penalty (See instructions)	▶ 14.		_____ .
15. Interest (See instructions)	▶ 15.		_____ .
16. Total Amount Due (Add Lines 13, 14 and 15)	16. \$		_____ .

**Part 3. Bulk Receipts of Alternative Fuel**

List all tax-paid bulk receipts of alternative fuel delivered to a on-highway storage facility and tax-free bulk receipts of alternative fuel that is delivered to a common storage facility. Do not list tax-free bulk receipts of alternative fuel delivered to a non-highway storage facility

Alternative Fuel Provider Information		First Month Gallons	Second Month Gallons	Third Month Gallons	Total Gallons Purchased
Account Number: _____	Tax-paid				
Name: _____					
Address: _____	Tax-free				
Account Number: _____	Tax-paid				
Name: _____					
Address: _____	Tax-free				
Account Number: _____	Tax-paid				
Name: _____					
Address: _____	Tax-free				
Account Number: _____	Tax-paid				
Name: _____					
Address: _____	Tax-free				
<b>Total tax-paid purchases (Should equal Part 1, Line 2, Column A)</b>					
<b>Total tax-free purchases (Should equal Part 1, Line 2, Column B)</b>					

**Part 4. Alternative Fuel Used in Interstate and Intrastate Operations**

Indicate the miles and fuel for motor vehicles using alternative fuel that operated within and outside of North Carolina this quarter.

Motor Vehicles Using Alternative Fuels	Number of Vehicles	Total Miles Traveled	Total Gallons Used from Tax-paid Storage	Total Gallons Used from Common Storage
1. Vehicles with gross vehicle weight of 26,000 lbs. or under				
2. Vehicles that operate only within North Carolina and have either a gross vehicle weight over 26,000 lbs. or 3 axles				
3. Vehicles that operate in and out of North Carolina and have either a gross vehicle weight over 26,000 lbs. or 3 axles				
4. Total gallons withdrawn from bulk storage for highway use (Add Lines 1, 2, and 3. Should equal Part 1, Line 4)				

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_  
I certify that, to the best of my knowledge, this return is accurate and complete.

**Returns are due by the last day of the month following the close of the quarter.**

**NOTE:** A penalty will be assessed against any bulk end-user of alternative fuels that fails to file this return by the due date of the return (G.S. 105.236(a)(3) and 105-236(a)(10)).

**MAIL TO:**  
 North Carolina Department of Revenue  
 Excise Tax Division  
 Post Office Box 25000  
 Raleigh, North Carolina 27640-0950

**QUESTIONS:**  
 Contact the Excise Tax Division at:  
 Telephone Number (919) 707-7500  
 Toll Free Number (877) 308-9092  
 Fax Number (919) 250-7898