

Motor Carrier Division 555 Wright Way Carson City, NV 89711 (775) 684-4711 Fax: (775) 684-4619 mctlc@dmv.nv.gov

dmv.nv.gov

## SCHEDULE OF RECEIPTS INSTRUCTIONS

Each receipt of product must be listed on a separate line. You must use the fuel type and terminal codes from the matrix. Use additional pages if needed. You may copy these forms as needed or attach a computerized spreadsheet, as long as all the required fields are represented on the spreadsheet.

## **GENERAL INSTRUCTIONS**

Fill out one Schedule of Receipts for each fuel/product type. On the top of each form put your Business Name, Account Number, FEIN, Fuel Type Code (from matrix), and Month/Year of Tax Return period. In recording gallons, round to whole gallons, eliminating any fraction less than one-half gallon, and increasing any fraction from one-half or more to the next higher gallon. Return all completed Schedules of Receipts with your tax return and make a copy for your records.

Schedule Type 2: Product that was received from a licensed Nevada Fuel Supplier or Dealer and you <u>did</u> <u>not pay</u> the Nevada fuel tax. Transfer total of each fuel/product type to the applicable line on the **Fuel Exporter Report**.

## **SPECIFIC INSTRUCTIONS**

**Column (1)** Transporter Name: Enter the name of the company delivering the product. To be valid, the transporter must be registered in Nevada. This includes pipeline, rail car, truck, or any other mode of transportation.

**Column (2)** Transporter FEIN: Enter the Federal Employer Identification Number of the company delivering the product.

**Column (3)** Mode: J = Truck PL = Pipeline R = Rail

ST = Stationary Transfer BA = Book Adjustment

**Column (4) Point of Origin/Destination:** Enter the city and state location the product was transported from/to. When received into or from a terminal, use the IRS Terminal Code Number.

**Column (5)** Received from: Enter the name of the licensed Nevada Fuel Supplier from which you purchased the product.

**Column (6)** Seller's FEIN: Enter the Federal Employer Identification Number of the company from which you purchased the product.

**Column (7) Date Received:** Enter the date the product changed title. For pipeline receipts, enter the date the fuel was actually delivered to the Nevada pipeline terminal **not** the invoice date.

**Column (8) Manifest Number:** Enter the identifying number from the BOL or Manifest issued at the terminal when the product was removed over the rack. In the case of pipeline movements, use the pipeline ticket number.

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Instructions: Schedule of Receipts

**Column (9) Net Gallons:** Enter the net gallons recorded on the manifest. For pipeline shipments, report the actual gallons received and added to your inventory.

Column (10) Gross Gallons: Enter the gross gallons recorded on the manifest.

**Column (11)** Billed Gallons: Enter the billed gallons recorded on the manifest. This should match either the net or gross gallons.

Enter the grand total for columns 9, 10 and 11 in the space provided at the bottom of the schedule. Carry the billed gallons total from column 11 forward to the appropriate line on the **Fuel Exporter Report**.

**TAXPAYER ASSISTANCE:** For additional information regarding this schedule, please contact Motor Carrier Division; 555 Wright Way; Carson City, NV 89711; telephone (775) 684-4711, ext. 2.

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