Form **8849**

(Rev. January 1997)

Claim for Refund of Excise Taxes

OMB No. 1545-1420

Department of the Treasury Internal Revenue Service

See separate instructions.

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<u>r</u>	Name of claimant				Taxpayer identification number				
type or	Address (number, street, and room or suite no.) City or town, state, and ZIP code					Telephone number ()			
Please type						Month your income tax year ends			
1	Type of excise tax return filed, if any (See instructions.) ☐ 720 ☐ 730			□ 2290		2 Total amount to be refunded \$			
_					*				
Cau	ition: Complete all applicable entries or your claim will be dela	ayed.							
3	Gasoline Wholesale Distributors			Period of claim ▶					
	Claimant bought gasoline or gasohol at a price that included the excise		Rate	Gallons		Amount of refund			
	tax and sold it directly to a state or local government for it use; directly to a nonprofit educational organization for its exc as supplies for vessels or aircraft; for export; or for use in the of special fuels. Claimant qualifies as a gasoline wholesale sold the fuel at a tax-excluded price, and obtained a ceultimate purchaser or proof of export from the buyer.	s exclusive clusive use; production distributor,							
а	Gasoline		\$.				301		
b	Gasohol containing at least 10% alcohol]				
С	Gasohol containing at least 7.7% alcohol but less than 10%	6 alcohol			}		312		
d	Gasohol containing at least 5.7% alcohol but less than 7.79				J				
4	Nontaxable Use of Gasoline		Period o	f claim ►					
		Type of use	Rate	Gallons	5	Amount of refund	CRN		
	Nontaxable use		\$.				301		
5	Nontaxable Use of Gasohol		Period of claim ▶						
		Type of use	Rate	Gallons	5	Amount of refund	CRN		
а	Gasohol containing at least 10% alcohol		\$.)				
b	Gasohol containing at least 7.7% alcohol but less than 10% alcohol				}		312		
С	Gasohol containing at least 5.7% alcohol but less than 7.7% alcohol				J				
6	Nontaxable Use of Undyed Diesel Fuel (Lines 6a a Sales by Registered Ultimate Vendors of Undyed I			f claim ▶			· · · ·		
	Claimant certifies that the diesel fuel did not contain visible If any of the diesel fuel included in this claim did contain vi			tach a detailed e	explanatio	n and check here .	. ▶ □		
	Caution: You cannot make a claim for refund on lines 6a	Type of use	D-4-	0 "		Amount of refund			
			Rate	Gallons	5	Amount of refund	CRN		
	or 6b for the tax paid on diesel fuel that you used on a farm for farming purposes or on diesel fuel for the exclusive use of a state or local government.		кате	Gallons	•	Amount of Teruna	CRN		
	or 6b for the tax paid on diesel fuel that you used on a farm for farming purposes or on diesel fuel for the exclusive use		кате	Gallons	<u>, </u>	Amount of return	CRN		
a	or 6b for the tax paid on diesel fuel that you used on a farm for farming purposes or on diesel fuel for the exclusive use of a state or local government. Lines 6a and b: Claimant has the name and address of the person(s) who sold the diesel fuel to the claimant and the date(s) of the purchase(s) and if exported, the required proof of export.		**	Gallons		Amount of return	CRN		
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Sign	der penalties of perjury, I declare that I have examined this claim, inclu I belief, it is true, correct, and complete.	ding accompanying schedul	es and statements, and to the best of my knowledge
Here			
	Signature	Date	(Please type or print name.)