



Form
FT-501X
State Form 47736
(R4 / 9-13)

Indiana Department of Revenue
**Amended Terminal Operator's
Monthly Return**
Due date is the 20th of the following month.

For the month of: _____, 20____

A Terminal Operator's Report Must Be Filed For Each Indiana Location Being Amended

Name of License Holder (as indicated on license)		License Number
Mailing Address	Federal 637 License Number	FEIN/SSN
City or Town	State	Zip Code Telephone Number

Terminal Information

Name of Terminal	Terminal Code
Location	

	From Schedule	Net Gallons as Previously Reported			Net Gallons as Amended		
		Column A Special Fuel (Dyed and Clear Diesel Fuel, Biodiesel, Blended Biodiesel, Compressed Natural Gas, Liquid Natural Gas, Butane, Propane)	Column B Gasoline (Gasoline, Gasohol)	Column C Other Products (Jet Fuel, Kerosene)	Column A Special Fuel (Dyed and Clear Diesel Fuel, Biodiesel, Blended Biodiesel, Compressed Natural Gas, Liquid Natural Gas, Butane, Propane)	Column B Gasoline (Gasoline, Gasohol)	Column C Other Products (Jet Fuel, Kerosene)
Monthly Transactions for Owned/Leased Terminal Space							
1. Beginning Physical Inventory							
2. Total Receipts	501A						
3. Total Disbursements	501B						
4. Stock Gains & Losses (select one) + -							
5. Ending Physical Inventory (Line 1 plus Line 2 minus Line 3 plus/minus Line 4)							

Mail to: Indiana Department of Revenue
P.O. Box 6080
Indianapolis, IN 46206-6080

I do hereby certify under penalty of perjury that, for the terminal location indicated above, the foregoing and attached schedules and reports are a true and correct statement to the best of my knowledge and is a complete and full presentation of all transactions from the best information available.

Taxpayer or Authorized Agent	Typed or Printed Name	Title
	Date Signed	Telephone Number

Please Check If Last Filing

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Instructions for Completing Form FT-501X

Who Should File This Return?

You should file this form if you are an Indiana Licensed Special Fuel Terminal Operator and you need to amend or change a previously filed Terminal Operator's Monthly Tax Return, Form FT-501.

How Do I Complete the FT-501X?

You should refer to the instructions for your original Terminal Operator's Monthly Tax Return, and related schedules, for the tax period being amended.

Enter your company's identifying information on form FT-501X and all accompanying schedules. Complete all information, leaving nothing blank. It is critical that you use the same license number on this report that is shown on your actual license. A separate FT-501X must be filed for each tax period requiring an amendment.

Net Gallons as Previously Reported:

Complete lines 1 through 5 of Column A, Column B and Column C by entering the amounts as reported on your original tax return, or as previously amended. (If previously amended, lines 1 through 5 will be the amounts reported in column titled "Net Gallons as Amended" of the previously filed amended return.)

Net Gallons as Amended:

Use this column to report changes in line amounts from those previously reported. Changes in column titled "Net Gallons as Amended" **must** be documented by attaching the corresponding schedules, as amended. If there is no change to a particular line entry, enter zero.

To Obtain Forms

To obtain forms, visit our website at www.in.gov/dor/3512.htm.

What if I Have Other Questions?

For assistance, call (317) 615-2630, or email fetax@dor.in.gov.