

STATE BOARD OF EQUALIZATION

P O BOX 942879 MIC: 65 SACRAMENTO CA 94279-0065

Use this form to report operations for the quarter ending 9 30 2008 Month Day

This report must be filed by the last day of the month following the end of the quarter.

Licensee IFTA identification number CA 888333 Name AgilCor Street address 1011 Central Ave. City Kansas City State MO Zip Code 64105

Address change [ ] No operation in any jurisdiction [ ] Cancel license [ ] Amend report

IFTA Quarterly Fuel Use Tax Report

File this report even if there is no tax due.

Use this form for filing your Quarterly Fuel Use Tax Report as required under the International Fuel Tax Agreement (IFTA). Read the instructions on the back carefully. Make a copy of this report for your records.

Attach check or money order payable to: CALIFORNIA STATE BOARD OF EQUALIZATION. See Mailing Instructions on the back of this form. Amount of your payment here \$ 258.11

Enter the Total from column Q of Form IFTA-101-MN, IFTA Quarterly Fuel Use Tax Schedule, for fuel types listed in lines 1 thru 4. For all other fuel types enter the Total Amount from column Q of the worksheet on back of Form IFTA-101-I-MN. Enter any credit amounts in brackets. Attach a Form IFTA-101-MN for each fuel type reported below.

Table with 11 rows for fuel types: 1 Diesel, 2 Motor fuel gasoline, 3 Ethanol, 4 Propane (LPG), 5 All other fuel types not listed in lines 1 thru 4, 6 Subtotal of amount due or (credit), 7 Penalty, 8 Total balance due or (credit), 9 Credits to be applied, 10 Balance due/(credit), 11 Refund amount requested.

I certify that this business is duly licensed and that this report, including any schedules, is to the best of my knowledge and belief true, correct and complete.

Authorized Signature, Official title, Paid preparer's name or firm, Paid preparer's address, Paid preparer's signature, Taxpayer's phone number, Paid preparer's EIN, Paid preparer's phone number, Date



Please make a copy of this report for your records.

# General Information

**Who Must File** - Anyone holding a license under the International Fuel Tax Agreement (IFTA) is required to file, on a quarterly basis Form IFTA-100, *IFTA Quarterly Fuel Use Tax Report*, and Form IFTA-101, *IFTA Quarterly Fuel Use Tax Schedule* for each fuel type. These forms are preprinted with your taxpayer identification number, name, address, fuel types and traveled jurisdictions and are mailed to you.

(IFTA-100-MN, IFTA Quarterly Fuel Use Tax Report and IFTA-101-MN, IFTA Quarterly Fuel Use Tax Schedule, are the manual versions of these forms that require you to enter all pertinent information and should only be used when the preprinted version is unattainable.)

Form IFTA-100 summarizes the amount of tax due or the amount to be credited for the various fuel types computed on each Form IFTA-101 and is used to determine the total amount due/credit, including any appropriate penalty and interest.

## Instructions

Enter the ending date of the quarter covered by this report.

Enter your licensee IFTA identification number. This is your federal employer identification number, social security number or other jurisdiction assigned identification number as it appears on your IFTA License.

Enter your legal name as it appears on your IFTA license and complete mailing address.

**Address Change** - Mark *X* in this box if this address is your new or corrected address.

**No Operation** - Mark *X* in this box if you did not operate a qualified motor vehicle(s) in any jurisdiction including your base jurisdiction during the quarter. Sign this report and mail to the address indicated on the report.

**Cancel License** - Mark *X* in this box if you are filing a final report and requesting your license be canceled. Complete report for your operations during the quarter and return your IFTA license and any unused decals to the address on your license. Destroy any used decals.

**Amended Report** - Mark *X* in this box if this report corrects a previous report. Indicate the quarter and amount of the report you are correcting. The amended report should show the correct figures for that quarter - not the difference. A detailed explanation of the changes must accompany the amended report.

### Line Instructions

Enter any credit amounts in brackets.

**Line 1** Enter the total amount from column Q on the front of Form IFTA-101-MN for diesel fuel.

**Line 2** Enter the total amount from column Q on the front of Form IFTA-101-MN for motor fuel gasoline.

**Line 3** Enter the total amount from column Q on the front of Form IFTA-101-MN for ethanol.

**Line 4** Enter the total amount from column Q on the front of Form IFTA-101-MN for propane (LPG).

**Line 5** Enter the total amount from column S on the worksheet on the back of Form IFTA-101 for all other fuel types.

**Line 6** Add lines 1 through 5. This amount is the net tax credits and taxes due for each fuel type reported on lines 1 through 5. Enter a net credit amount in brackets.

**Line 7** Penalty - A penalty of 10% of due tax on taxes, whichever is greater, imposed for the failure to file a report, for filing a late report, or for underpayment of tax due.

**Line 8** Add lines 6 and 7. Enter a credit amount in brackets.

**Line 9** Enter the amount of prior credit carryover claiming. Any credit not claimed will be carried over to the next filing period.

**Line 10** Subtract line 9 from line 8. Enter a credit amount in brackets. If the amount on line 10 is a balance due, enter the amount of your payment in the payment box above line 1.

**Line 11** Enter the portion of the credit that you want refunded to you. If you do not request a refund of the total credit, any remaining credit balance will be available on your next quarterly report. **Caution:** Credit balances can not be carried over more than eight quarters (two years) from the quarter earned.

**Signature** - The report must be signed and dated by the owner (an individual business), a partner (if a partnership or a limited liability partnership), a member (if a limited liability company) or (if a corporation) by the president, treasurer, chief accounting officer, or any other person specifically authorized to act on behalf of a corporation. The fact that an individual's name is signed on the certification shall be prima facie evidence that the individual is authorized to sign and date the report on behalf of the business.

Additionally, if anyone other than an employee, owner, partner, officer or member of the business is paid to prepare the report he or she is required to sign and date the report and provide his or her EIN/social security number, mailing address and telephone number.

For additional forms or information, see the back of Form IFTA-101-I-MN, *Instructions for completing Form IFTA-101-MN*.

IFTA Pro

CALIFORNIA BO,  
P O BOX 22099  
ALBANY NY 1220

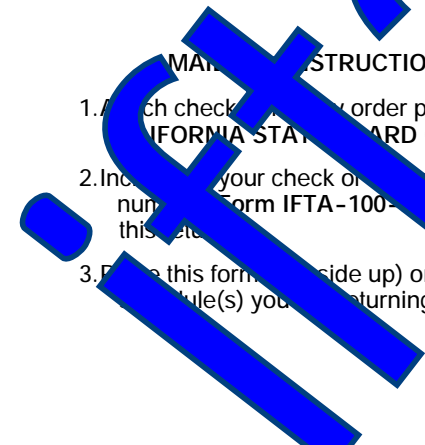


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Check only one fuel type:

Code Fuel Type

- D (Diesel)
- G (Motor fuel gasoline)
- E (Ethanol)
- P (Propane)
- 

California State Board of Equalization  
**IFTA Quarterly Fuel Use Tax Schedule**

Attach this schedule to Form IFTA-100-MN,  
**IFTA Quarterly Fuel Use Tax Report.**

Prepare a separate schedule for each fuel type. Use additional sheets if necessary. Make a copy for your records.

IFTA-101-MN

Use this form to report operations for the quarter ending 9/30/2010  
 Month Year

Licensee IFTA identification number **CA 888333** Name **AgilCor**

Enter credits in brackets ([ ]). Round to the nearest whole gallon or mile. Read instructions (IFTA-101-I-MN) carefully.

(A) Total IFTA Miles + (B) Total Non-IFTA Miles = (C) Total Miles ÷ (D) Total Gallons (all IFTA and Non-IFTA jurisdictions) = (E) Average Fuel Consumption (MPG)

(A) 356000 + (B) 47400 = (C) 403400 ÷ (D) 82760 = (E) 4.87

F Jurisdiction	G Rate Code	H Total Miles	I Taxable Miles	J MPG from E above	K Taxable Gallons (col. I ÷ J)	L Tax Paid Gallons	M Net Taxable Gallons (col. K - L)	N Tax Rate	O Tax (Credits Due) (col. M x N) (col. K x N (Subtract))	P Interest	Q Total Due (col. O + P)	
Alabama	AL	051	400	400	n/a	82	80	2	.1900	0.28	0.00	0.38
Arkansas	AR	053	600	600	4.87	123	120	3	.2500	0.75	0.00	0.68
Arizona	AZ	062	800	800	4.87	164	160	4	.2400	1.00	0.00	1.04
California	CA	051	1000	1000	4.87	205	200	5	.3660	1.83	0.00	1.83
Colorado	CO	053	1200	1200	4.87	246	240	6	.2050	1.23	0.00	1.23
Connecticut	CT	052	1400	1400	4.87	287	280	7	.4300	3.04	0.00	3.04
Delaware	DE	049	1600	1600	4.87	329	320	9	.2100	1.98	0.00	1.98
Florida	FL	053	1800	1800	4.87	370	360	10	.3107	3.11	0.00	3.11
Georgia	GA	052	2000	2000	4.87	413	400	11	.1670	1.84	0.00	1.84
Iowa	IA	053	2200	2200	4.87	452	440	12	.2250	(6.30)	0.00	(6.30)
Idaho	ID	053	2400	2400	4.87	493	480	13	.2500	(6.75)	0.00	(6.75)
Illinois	IL	053	2600	2600	4.87	534	520	14	.3750	(9.75)	0.00	(9.75)
Indiana	IN	104	2800	2800	4.87	575	560	15	.1600	(4.00)	0.00	(4.00)
IN-surcharge	IN	105							.1100	63.25	0.00	63.25
Kansas	KS	053	3000	3000	4.87	616	600	16	.2600	(6.24)	0.00	(6.24)
Kentucky	KY	096	3200	3200	4.87	657	640	17	.1810	(4.16)	0.00	(4.16)
KY-surcharge	KY	097							.0840	55.19	0.00	55.19
Louisiana	LA	053	3400	3400	4.87	698	680	18	.2100	(4.40)	0.00	(4.40)
Massachusetts	MA	053	3600	3600	4.87	739	720	19	.2100	(4.41)	0.00	(4.41)
Maryland	MD		3800	3800	4.87	780	760	20	.2100	(4.85)	0.00	(4.85)
Maine	ME		4000	4000	4.87	821	800	21	.2100	(5.62)	0.00	(5.62)
Michigan	MI	07	4200	4200	4.87	862	840	22	.2100	(7.06)	0.00	(7.06)
Minnesota	MN	053	4400	4400	4.87	903	880	23	.2100	(3.83)	0.00	(3.83)
Missouri	MO	053	4600	4600	4.87	945	920	24	.2100	(2.55)	0.00	(2.55)
<b>Subtotals</b>												
<b>Subtotals on back</b>												
<b>Totals</b>			403400	403400			82833			258.11	0.0	258.11

Note: Page totals are included on back of this form.



Important Note: When listing additional jurisdictions and space is needed, use the back of this form.

For Diesel, Motor fuel gasoline, Ethanol amount in Column Q from each schedule. For all other fuel types, transfer the total amount of Column Q from each schedule to Column S of the worksheet on the back of Form IFTA-101-I-MN, **Instructions for Form IFTA-101-MN.**

IFTA-101-MN (3/00)

