MISSOURI DEPARTMENT OF

Form

Non-Highway Use Motor Fuel Refund Claim



	Business Name			FEIN			Phone Number			
Claimant							()			
	First Name			Last Name	Social Security Number					
	Spouse's First Name			Last Name	Spouse's Social Security Number					
							1 1	1	1	I
	Mailing Address City				State	ZIP Code	Fax Number			
							()			
	Email Address			Avg Price Per Gal (Gasoline) See Instructions			Avg Price Per Gal (Clear Diesel and Kerosene) See Instructions			

The refund claim must be filed within one year of the date of purchase or April 15 following the year of purchase, whichever is later. Form 4924 must be on file with the Department or submitted at the same time as Form 4923, in order to process this claim. Verify proper address above, as refund checks cannot be forwarded. Form 4923 must be accompained with the applicable Form(s) 4923S, Statement of Missouri Fuel Tax Paid for Non-Highway Use. For example, if you purchased fuel that was taxed at \$0.245 per gallon and fuel taxed at \$0.27 per gallon, you will need to submit Form 4923; Form 4923S-D to report the purchases at the \$0.245 rate; and Form 4923S-E to report the purchases at the \$0.27 rate.

	Ρι	rposes for which off-road fuel is used. ROUND TOTAL GALLONS TO NEAREST GALLON	Gasoline Gallons (\$.245 Receipts)	Gasoline Gallons (\$.27 Receipts	Gasoline Gallons ) (\$.295 Receipts)	Clear Diesel Gallons (\$.245 Receipts)	Clear Diesel Gallons (\$.27 Receipts)	Clear Diesel Gallons (\$.295 Receipts)					
	1	Agricultural use, fuel used in lawn mower, farm equipment, etc.											
	2	Commercial or construction use, fuel used in off-road equipment											
	3	Reefer use											
	4	Marine use (Complete Form 4925D, 4925E, or 4925F and attach)											
	5	Power Take-Off (PTO) use, fuel used in auxiliary equipment (Complete Form 588E, 588F, or 588G and attach)											
	6	Home heating, fuel used for heating purposes											
	7	Business heating, fuel used for heating purposes											
	8	Motor fuel used in aircraft engines											
	9	Ingredient or component part of a manufactured product											
	10	Retailer making bulk deliveries to farmers (Complete Form 5085D, 5085E, or 5085F and attach)											
ag	11	Retailer selling kerosene through barricaded pumps											
ruel Usage	12	Retailer selling kerosene through non-barricaded pumps (21 gallons or less)											
ene	13	Motor Fuel sold to or purchased by Federal Government											
	14	Motor Fuel sold to or purchased by public mass transportation operator											
	15	Other claims not covered by the above options (attach additional page)											
	16	Total Gallons (For each column, add lines 1 through 15)											
	17	Less eligible purchaser allowance gallons (if applicable)											
	18	Total gallons (line 16 minus line 17)											
	19	Tax Rate	\$0.245	\$0.27	\$0.295	\$0.245	\$0.27	\$0.295					
	20	Total tax paid on motor fuel gallons used for off-road purposes (line 18 times line 19)											
	21	Total \$.09 aviation fuel gallons used for commercial agricultural purposes											
	22	Total \$.09 aviation fuel refund claimed (line 21 times \$.09)											
	23	Total refund (line 20, add all column totals plus line 22)											
			fice Use ONLY										
- H	24	Total motor fuel refund											
	25	Less Applicable sales tax											
	26	Total motor fuel refund approved											
	If you would like your refund deposited directly to your checking or savings account, complete boxes a, b, and c below.												
	a. Routing Number b. Account Number						Savings						
								Joavings					
Signature	thi or pu	der penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct. I state that I have prepared or reviewed claim and take full responsibility for the information thereon, that I have made the purchases and used the motor fuel as shown above and paid the tax on the invoices, that the invoice dates or extensions have not been changed, and that no portion of such motor fuel listed on this form has been or will be used on lic roads of the state of Missouri, and that I am entitled to the refund amount claimed.											
ign	Się	gnature		Title									
ົ	Pri	inted Name						Date (MM/DD/YYYY)					



#### E-mail: <u>motorfuelrefunds@dor.mo.gov</u>

Visit <u>dor.mo.gov/taxation/business/tax-types/motor-fuel/</u> for additional information. Form 4923 (Revised 07-2025)

# Section 142.824\_— (Motor Fuel Tax Law) Provides the following requirements

To claim a refund for motor fuel tax paid on fuel used for exempt non-highway purposes, the ultimate consumer or retailer must file the claim within one year of the date of purchase or April 15th following the year of purchase, whichever is later. Form 4924, Non-Highway Motor Fuel Tax Refund Application, must be on file with the Department in order to process this claim and may be submitted at the same time as Form 4923. Form 4923 must be accompanied with the applicable Form 4923S, Statement of Missouri Fuel Tax Paid for Non-Highway Use. For example, if you purchased fuel that was taxed at \$0.245 per gallon and fuel taxed at \$0.27 per gallon, you will need to submit Form 4923; Form 4923S-D to report the purchases at the \$0.245 rate; and Form 4923S-E to report the purchases at the \$0.27 rate.

## Instructions for completing form

Average Price Per Gallon: To calculate the average price per gallon, add the price per gallon for each applicable transaction, from each receipt. Then divide the total dollar amount by the number of applicable transactions on each receipt.

### Round all gallons to nearest gallon

- Line 1: Enter total gallons of fuel used in equipment for agricultural purposes or fuel used in residential or personal off-road equipment (residential lawn mowers, ATV's, chain saws, weed eaters, etc.).
- Line 2: Enter total gallons of fuel used in off-road equipment for commercial or construction purposes.
- Line 3: Enter total gallons of fuel used in reefer units.
- Line 4: Enter total gallons of fuel used in watercraft. Attach a completed Form 4925D for \$0.245 receipts, Form 4925E for \$0.27 receipts, and Form 4925F for \$0.295 receipts.
- Line 5: Enter total gallons of fuel used in the operation of PTO equipment. Attach a completed Form 588-E for \$0.245 receipts, Form 588-F for \$0.27 receipts, and Form 588-G for \$0.295 receipts.
- Line 6: Enter total gallons of fuel used for home heating purposes.
- Line 7: Enter total gallons of fuel used for business heating purposes.
- Line 8: Enter total gallons of gasoline used in aircraft.
- Line 9: Enter total gallons of fuel used as an ingredient or component part of the finished product.
- Line 10: Retailers, enter the bulk sales of one hundred gallons or more of gasoline delivered to farmers. Attach a completed Form 5085D for \$0.245 receipts, Form 5085E for \$0.27 receipts, and Form 5085F for \$0.295.
- Line 11: Retailers, enter the total gallons of kerosene sold through barricaded pumps.
- Line 12: Retailers, enter the total number of gallons of kerosene sold in quantities of 21 gallons or less through non-barricaded pumps.
- Line 13: Enter the total gallons of fuel sold to or purchased by the Federal Government.
- Line 14: Enter the total gallons of fuel sold to or purchased by the public mass transportation operator.
- Line 15: Enter total gallons of fuel used for other off-road purposes. Explain how the fuel is used for off-road purposes.
- Line 16: Enter total gallons.
- Line 17: Enter gallons of eligible purchaser allowance. Motor fuel distributor claimants only.
- Line 18: Enter total gallons subject to a refund (Line 16 less Line 17).
- Line 19: Tax Rate
- Line 20: Enter total tax paid on gallons used for off-road purposes, by tax rate (Line 18 times Line 19).
- Line 21: Enter total \$.09 aviation fuel gallons used for commercial agricultural purposes.
- Line 22: Enter total \$.09 aviation fuel tax paid on gallons used for commercial agricultural purposes (Line 21 multiplied by \$.09).
- Line 23: Enter total refund amount. Add all columns from line 20 plus line 22.
- Line 24: Lines 24 through 26: For office use only. The Department will calculate, if applicable.

### Remember to sign and date form. Claims received unsigned will be returned.

If you have questions or need assistance in completing this form, please call this office at (573) 751-7671 (TTY (800) 735-2966) or e-mail this office at: **motorfuelrefunds@dor.mo.gov**. You may also access a copy of this form on the Department's website: **dor.mo.gov/forms**.

### Ever served on active duty in the United States Armed Forces?

If yes, visit <u>dor.mo.gov/military/</u> to see the services and benefits DOR offers to all eligible military individuals, or complete the survey at <u>mvc.dps.mo.gov/MoVeteransInformation/Survey/DOR</u> to receive information from the Missouri Veterans Commission. A list of all state agency resources and benefits can be found at <u>veteranbenefits.mo.gov/state-benefits/</u>.