



**ALABAMA DEPARTMENT OF REVENUE
BUSINESS AND LICENSE TAX DIVISION
MOTOR FUELS SECTION**

Return No. _____

P.O. Box 327540 • Montgomery, AL 36132-7540 • (334) 242-9608 • (334) 242-1199 Fax
www.revenue.alabama.gov

SUB: MT-1 10/11

Motor Carrier Mileage Tax Return

NAME		MONTH OF	ACCOUNT NUMBER
ADDRESS		CITY	STATE ZIP CODE
<input type="checkbox"/> Check Here If New Address	CONTACT PERSON	E-MAIL ADDRESS	PHONE NUMBER ()

TAX COMPUTATION

1. Total Taxable Miles In Alabama	1		
2. Rate Per Mile	2	\$	
3. Mileage Tax (Multiply Line 1 by Line 2)	3	\$	
4. 50% No Alabama License Tag Tax	4	\$	
5. 10% Failure to Timely File Penalty	5	\$	
6. 10% Failure to Timely Pay Penalty	6	\$	
7. Interest	7	\$	
8. Total Amount Due	8	\$	
9. Amount Paid	9	\$	

AFFIDAVIT

I hereby certify that to the best of my knowledge and belief that the information contained in this return is true and correct.

SIGNATURE OF AUTHORIZED PERSON

DATE

NOTICE: This return must be received by the Alabama Department of Revenue on or before the fifteenth (15) day of the month succeeding the month in which the tax accrues.

RATE SCHEDULE	
Seating Capacity	Tax Rate Per Mile
Less than 17	\$.0025
17 and under 22	\$.0050
22 and under 26	\$.0075
26 and over	\$.01