



TENNESSEE DEPARTMENT OF REVENUE  
EXPORTER TAX RETURN & CLAIM FOR REFUND

**PET  
377**

Filing Period Beginning: _____ Ending: _____ Due Date: _____	Account No. _____ Location Address _____	SSN or FEIN _____ If this is an AMENDED RETURN, please check the box at right <input type="checkbox"/>
		If this is a CLAIM FOR REFUND, please check the box at right <input type="checkbox"/>
Make your check payable to the Tennessee Department of Revenue for the amount shown on Line 15 and mail to:  Tennessee Department of Revenue Andrew Jackson State Office Bldg. 500 Deaderick Street Nashville, TN 37242		

EXPORT GALLONS	GASOLINE COLUMN A	DIESEL DYED COLUMN B	DIESEL UNDYED COLUMN C	KEROSENE COLUMN D	JET FUEL COLUMN E	AV GAS COLUMN F	TOTAL COLUMN G
1. Destination state tax paid gallons (net of diversions) .....	_____	_____	_____	_____	_____	_____	_____
2. Tax free gallons (see instructions) .....	_____	_____	_____	_____	_____	_____	_____
3. Diversions into Tennessee .....	_____	_____	_____	_____	_____	_____	_____
4. Tennessee tax paid gallons .....	_____	_____	_____	_____	_____	_____	_____
5. Diversions from Tennessee .....	_____	_____	_____	_____	_____	_____	_____
6. Total gallons exported (Total of lines 4 and 5)	_____	_____	_____	_____	_____	_____	_____

REFUND COLUMN A

TAX COLUMN B

7. Gasoline privilege tax .....	Line 6-A multiplied by \$0.236300 _____	•	Line 3-A multiplied by \$0.24 ....	•
8. Diesel use tax .....	Line 6-C multiplied by \$0.206763 _____	•	Line 3-C multiplied by \$0.21.....	•
9. Special privilege tax .....	Line 6-G multiplied by \$0.0095 ....	•	Line 3-G multiplied by \$0.01 ....	•
10. Environmental assurance fee .....	Line 6-G multiplied by \$0.004 .....	•	Line 3-G multiplied by \$0.004 ..	•
11. Totals .....	Credit - add lines in Refund Column _____	•	Tax - add lines in Tax Column .	•
12. Enter outstanding credit amount from previous Department of Revenue notice(s) .....	_____	•	_____	•
13. Penalty <small>{ If filed LATE, compute penalty at 5% of the tax (Line 11B minus Line 12 and 11A) for each 1 to 30 DAY PERIOD or portion thereof for which TAX IS DELINQUENT (Total penalty NOT TO EXCEED 25%.) Minimum penalty is \$15 regardless of the amount of tax due or whether there is any tax due.</small> .....	_____	•	_____	•
14. Interest (Line 11B minus Line 12 and 11A multiplied by _____ % per annum on taxes unpaid by the due date) .....	_____	•	_____	•
15. TOTAL REMITTANCE AMOUNT (Total of lines 11B, 13, and 14; subtract line 12 and 11A if applicable) .....	_____	•	_____	•
16. Overpayment - If you are due a refund, please indicate the amount here .....	_____	•	_____	•

Under penalties of perjury, I declare that I have examined this report, and to the best of my knowledge and belief, it is true, correct, and complete.	
Taxpayer's Signature _____	Date _____
Signature of Preparer other than Taxpayer _____	Date _____
Tax Preparer's Address _____	Phone Number _____



**FOR OFFICE  
USE ONLY**

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For additional information, contact the Taxpayer Services Division in one of our Department of Revenue Offices:

**Chattanooga**  
 (423) 634-6266  
 Suite 203  
 1301 Riverfront  
 Parkway

**Jackson**  
 (731) 423-5747  
 Suite 340  
 Lowell Thomas Building  
 225 Martin Luther King Blvd.

**Johnson City**  
 (423) 854-5321  
 204 High Point Drive

**Knoxville**  
 (865) 594-6100  
 Suite 209  
 7175 Strawberry  
 Plains Pike

**Memphis**  
 (901) 213-1400  
 3150 Appling Road  
 Bartlett, TN

**Nashville**  
 (615) 253-0600  
 Andrew Jackson Building  
 500 Deaderick Street

Tennessee residents can also call our statewide toll free number at 1-800-342-1003.  
 Out-of-state callers must dial (615) 253-0600.

Date	Checked By	<p style="text-align: center;"><b>For Office Use Only</b>  <b>REFUND APPROVAL</b>  <b>Approved Amount \$ _____</b></p> <p>_____  <i>Director or Designate</i> <span style="float: right;"><i>Date</i></span></p> <p>_____  <i>Commissioner of Revenue or Designate</i> <span style="float: right;"><i>Date</i></span></p>
<input type="checkbox"/> APPROVED <input type="checkbox"/> REDUCED <input type="checkbox"/> INCREASED	REASON FOR REDUCTION	