Department of Revenue Services
State of Connecticut
Business Tax Subdivision/
Excise Tax Field Unit
PO Box 5031
Hartford CT 06102-5031

AU741 0725W 01 9999

Form AU-741

Motor Vehicle Fuels Tax Refund Claim

Commuter Vans (Rev. 07/25)

2025

Refund claims must be filed on or before May 31, 2026, for fuel used during calendar year 2025. You must check the appropriate fuel type box below. Please note that each form is year specific. To prevent any delay in processing your return, the correct year's form **must** be submitted to the Department of Revenue Services (DRS). Do not use staples.

► Period of claim in calendar year __-__-____ (MM-DD-YYYY) through __-__-____ (MM-DD-YYYY)

Type of business

► Connecticut Tax Registration Number

Name of claimant (print)

► Federal Employer Identification Number

Address (number and street)

► Social Security Number

City or town | State | ZIP code

Check here if address change. ► ☐

Location of records if different from above

Telephone number

Fuel type: ► ☐ Diesel ► ☐ Motor vehicle fuels (gasoline-gasohol) ► ☐ Alternative fuels

Claim type: ► ☐ Commuter vans

A ***qualifying vehicle*** is a vehicle which meets the average daily passenger minimum of nine

Owner or lessee of vehicle | Vehicle registration number | ► Average daily passengers (Minimum 9)

Name of driver | Employer of driver | Daily miles traveled

Daily routes traveled (start – finish – towns)

Part 1 - Computation of Net Refund. **Round all gallons to the nearest whole number.**

1.	Odometer reading at end of a period for qualifying vehicles	1. ►
2.	Odometer reading at beginning of a period for qualifying vehicles	2. ►
3.	Total mileage for a period: Subtract Line 2 from Line 1.	3. ►
4.	Total gallons of fuel for period for qualifying vehicles	4. ►
5.	Average miles per gallon: Divide Line 3 by Line 4; carry to .0001.	5. ► .
6.	Total Connecticut miles to and from work for this period	6. ►
7.	Refund gallons: Divide Line 6 by Line 5.	7. ►
8.	Tax refund claimed: Multiply Line 7 by _______ per gallon. See *Refund Rates* on Page 3.	8. ► .00

Declaration: I declare under penalty of law that I have examined this return (including any accompanying schedules and statements) and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false return or document to DRS is a fine of not more than $5,000, or imprisonment for not more than five years, or both. The declaration of a paid preparer other than the taxpayer is based on all information of which the preparer has any knowledge.

Sign Here

Keep a copy of this return for your records.

Taxpayer signature | Title | Date (MM-DD-YYYY)

Print taxpayer name | Telephone number

Paid preparer signature | Preparer address | Preparer's SSN or PTIN

Taxpayer's email address

Complete *Schedule A*, on Page 2 before completing *Part 1 - Computation of Net Refund*.

Visit us at **portal.ct.gov/DRS** for more information.

Connecticut Tax Registration Number

Schedule A

Statement of motor vehicle fuel purchases by month: Receipts **must** be attached. Attach additional sheet(s) as necessary to provide a complete response.

Column 1 Month	**Column 2** Name of Supplier	**Column 3** Gallons of Fuel
Total: Total of all amounts in Column 3. Enter here and on Part 1, Line 4. Round to the nearest whole number.		

Form AU-741 - Instructions

General Instructions

Complete this form in blue or black ink only.

Your motor vehicle fuels tax refund claim for fuel used during calendar year 2025 must:

1. Be filed with DRS on or before May 31, 2026; **and**
2. Involve at least 200 gallons of fuel eligible for tax refund.

The appropriate fuel type and claim type box must be marked on the front of this form to process this claim. You must file a separate **Form AU-741,** *Motor Vehicle Fuels Tax Refund Claim,* for each motor vehicle fuel type, claim type, or for any rate change listed.

Provide a telephone number where DRS can contact you.

You must indicate your Connecticut Tax Registration Number, Federal Employer Identification Number (FEIN), or Social Security Number (SSN) in the space provided.

Mail the completed refund application to:

Department of Revenue Services
State of Connecticut
Business Tax Subdivision/Excise Tax Field Unit
PO Box 5031
Hartford CT 06102-5031

Your refund will be applied against any outstanding DRS tax liability.

Part 1 - Instructions

Complete *Schedule A* before completing *Part 1 - Computation of Net Refund*.

Round all gallons to the nearest whole number.

Line 8 only - Rounding off to whole dollars: You must round off cents to the nearest whole dollar on your return and schedules. If you do not round, DRS will disregard the cents. Round down to the next lowest dollar all amounts that include 1 through 49 cents. Round up to the next highest dollar all amounts that include 50 through 99 cents

Line 8 - Tax refund claimed: Use the table to calculate the proper tax refund rate based on when your purchase was made.

Schedule A - Instructions

For all purchases of fuel listed, you must attach a copy of each numbered slip or invoice issued at the time of the purchase. The slip or invoice may be the original or a photocopy and must show:

1. Date of purchase;
2. Name and address of the seller, which must be printed or rubber stamped on the slip or invoice;
3. Name and address of the purchaser, which must be the name and address of the person or entity filing the claim for refund;
4. Number of gallons of fuel purchased;
5. Price per gallon;
6. Total amount paid; **and**
7. If payment is made within a discounted period, provide proof of amount paid.

You must keep records to substantiate your refund claim for at least three years following the filing of the claim and make them available to DRS upon request.

2025 Tax Refund Rates for Commuter Vans Only	
January 1, 2025, through June 30, 2025, purchases	
Diesel	52.4¢ per gallon
Motor vehicle fuels	25¢ per gallon
Alternative fuels	26¢ per gallon
July 1, 2025, through December 31, 2025, purchases	
Diesel	48.9¢ per gallon
Motor vehicle fuels	25¢ per gallon
Alternative fuels	26¢ per gallon

You must also file a separate Form AU-741 for each fuel type, claim type or for any rate change listed above.

For Further Information on the Motor Vehicle Fuels Tax

Call the Business Tax Subdivision/Excise Tax Field Unit at **860-541-3224**, Monday through Friday, between 8:30 a.m. and 4:30 p.m.

For the Latest News

Visit the DRS website at **portal.ct.gov/DRS**.

E-Services Update

Use **myconneCT** to file taxes, make payments, view filing history, and communicate with the agency simply and more efficiently on virtually any mobile device, including laptops, tablets, and smartphones, 24 hours a day, 7 days a week. For updated information, please visit the DRS website at **portal.ct.gov/DRS-myconneCT**.