

Quarterly Federal Excise Tax Return

OMB No. 1545-0023

See the Instructions for Form 720.

Go to www.irs.gov/Form720 for instructions and the latest information.

Check here if:
 Final return
 Address change

Name Madison County Board of Supervisors Number, street, and room or suite no. (If you have a P.O. box, see the instructions.) 125 West North Street City or town, state or province, country, and ZIP or foreign postal code Canton, MS, USA 39046	Quarter ending June 30, 2025 Employer identification number 64-6000658
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Part I

IRS No.	Environmental Taxes (attach Form 6627; ODCs are ozone-depleting chemicals)	Tax	IRS No.
53	Domestic petroleum superfund tax*		53
18	Domestic petroleum oil spill tax		18
16	Imported petroleum products superfund tax		16
21	Imported petroleum products oil spill tax		21
54	Chemicals (other than ODCs)		54
17	Imported chemical substances		17
98	ODCs		98
19	ODC tax on imported products		19
	Communications and Air Transportation Taxes (see instructions)	Tax	
22	Local telephone service and teletypewriter exchange service		22
26	Transportation of persons by air*		26
28	Transportation of property by air*		28
27	Use of international air travel facilities*		27
	Fuel Taxes	Tax	
	Number of gallons	Rate	
60	(a) Diesel, tax on removal at terminal rack	\$.244	60
	(b) Diesel, tax on taxable events other than removal at terminal rack	.244	
	(c) Diesel, tax on sale or removal of biodiesel mixture (not at terminal rack)	.244	
104	Diesel-water fuel emulsion	.198	104
105	Dyed diesel, LUST tax	.001	105
107	Dyed kerosene, LUST tax	.001	107
119	LUST tax, other exempt removals (see instructions)	.001	119
35	(a) Kerosene, tax on removal at terminal rack (see instructions)	.244	35
	(b) Kerosene, tax on taxable events other than removal at terminal rack	.244	
69	Kerosene for use in aviation (see instructions)	.219	69
77	Kerosene for use in commercial aviation (other than foreign trade)	.044	77
111	Kerosene for use in aviation, LUST tax on nontaxable uses	.001	111
79	Other fuels (see instructions)		79
62	(a) Gasoline, tax on removal at terminal rack	.184	62
	(b) Gasoline, tax on taxable events other than removal at terminal rack	.184	
13	Any liquid fuel used in a fractional ownership program aircraft (see instructions)	.141	13
14	Aviation gasoline*	.194	14
112	Liquefied petroleum gas (LPG) (see instructions)	.183	112
118	"P Series" fuels	.184	118
120	Compressed natural gas (CNG) (see instructions)	.183	120
121	Liquefied hydrogen	.184	121
122	Fischer-Tropsch process liquid fuel from coal (including peat)	.244	122
123	Liquid fuel derived from biomass	.244	123
124	Liquefied natural gas (LNG) (see instructions)	.243	124

* See instructions to ensure correct rate.

IRS No.		Rate	Tax	IRS No.	
33	Retail Tax —Truck, trailer, and semitrailer chassis and bodies, and tractor	12% of sales price		33	
29	Ship Passenger Tax Transportation by water	Number of persons \$3 per person		29	
31	Other Excise Tax Obligations not in registered form	Amount of obligations \$.01		31	
30	Foreign Insurance Taxes —Policies issued by foreign insurers	Premiums paid	Rate	Tax	IRS No.
	Casualty insurance and indemnity bonds		\$.04		30
	Life insurance, sickness and accident policies, and annuity contracts		.01		
	Reinsurance		.01		
	Manufacturer's Taxes	Number of tons	Sales price		
36	Coal—Underground mined		\$1.10 per ton		36
37			4.4% of sales price		37
38	Coal—Surface mined		\$.55 per ton		38
39			4.4% of sales price		39
108	Taxable tires other than bias ply or super single tires	Number of tires		Tax	IRS No.
109	Taxable bias ply or super single tires (other than super single tires designed for steering)				109
113	Taxable tires, super single tires designed for steering				113
40	Gas guzzler tax. Attach Form 6197. Check if one-time filing <input type="checkbox"/>				40
97	Vaccines (see instructions)				97
	Reserved for future use	Sales price	2.3% of sales price		
1	Total. Add all amounts in Part I. Complete Schedule A unless one-time filing			\$	

Part II

IRS No.	Patient-Centered Outcomes Research Fee (see instructions)	(a) Avg. number of lives covered (see inst.)	(b) Rate for avg. covered life	(c) Fee (see instructions)	Tax	IRS No.
133	Specified health insurance policies					133
	(a) With a policy year ending before October 1, 2024		\$3.22			
	(b) With a policy year ending on or after October 1, 2024, and before October 1, 2025		\$3.47			
	Applicable self-insured health plans					
	(c) With a plan year ending before October 1, 2024	693	\$3.22	2,231.46		
	(d) With a plan year ending on or after October 1, 2024, and before October 1, 2025		\$3.47			
			Rate	Tax		
41	Sport fishing equipment (other than fishing rods and fishing poles)		10% of sales price			41
110	Fishing rods and fishing poles (limits apply, see instructions)		10% of sales price			110
42	Electric outboard motors		3% of sales price			42
114	Fishing tackle boxes		3% of sales price			114
44	Bows, quivers, broadheads, and points		11% of sales price			44
106	Arrow shafts		\$.63 per shaft			106
140	Indoor tanning services		10% of amount paid			140
64	Inland waterways fuel use tax	Number of gallons	Rate	Tax		64
125	LUST tax on inland waterways fuel use (see instructions)		\$.29			125
51	Section 40 fuels (see instructions)		.001			51
117	Biodiesel sold as but not used as fuel					117
20	Floor stocks tax—Ozone-depleting chemicals. Attach Form 6627.					20
150	Repurchase of corporate stock. Attach Form 7208.					150
142	Sales of designated drugs during statutory periods.					142
2	Total. Add all amounts in Part II			\$	2,231	46

Part III

3	Total tax. Add Part I, line 1, and Part II, line 2			3	2,231	46
4	Claims (see instructions; complete Schedule C)		4			
5	Deposits made for the quarter	5	2,231	46		
	<input type="checkbox"/> Check here if you used the safe harbor rule to make your deposits.					
6	Overpayment from previous quarters	6				
7	Enter the amount from Form 720-X included on line 6, if any	7				
8	Add lines 5 and 6	8	2,231	46		
9	Add lines 4 and 8	9			2,231	46
10	Balance Due. If line 3 is greater than line 9, enter the difference. Pay the full amount with the return. (See instructions.)	10				
11	Overpayment. If line 9 is greater than line 3, enter the difference. Check if you want the overpayment: <input type="checkbox"/> Applied to your next return, or <input type="checkbox"/> Refunded to you.	11				

Third Party Designee Do you want to allow another person to discuss this return with the IRS? (See instructions.) **Yes.** Complete the following. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature: *Na'Son White* Date: *7/31/2025* Title: **Comptroller**

Type or print name below signature: **Na'Son White** Telephone number: **601-855-5580**

Paid Preparer Use Only

Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____ Check if self-employed PTIN: _____

Firm's name: _____ Firm's EIN: _____

Firm's address: _____ Phone no.: _____