

Department of Taxation and Finance Petroleum Business Tax Return Tax Law – Articles 12-A and 13-A

0425 For office use only

Use	this for	m to	report transactions for the month of Apr	ril 2025. This return must h	be file	ed by May 20, 2025.					
Employer identification number (EIN) Business telephone number () Business Tax Web File- Filer fell under this require							Most				
Legal name filers fall under this requiren (see instructions).											
DBA Change of business inform You can update your addre								n –			
Street and other business inform by visiting our website. Se											
City, state, ZIP code Change of business inform Form PT-100-I.											
Read Form PT-100-I, <i>Instructions for Form PT-100</i> , carefully. Keep a copy of this completed form for your red									yment enclosed		
Pa	Mail to: NYS TAX DEPARTMENT, PO BOX 15197, ALBANY NY 12212-5197										
Type of filer - Mark an X in all boxes that apply. You must submit the appropriate attachments for each box marks									Totals		
1	Motor fuel (registered as a distributor of motor fuel or as a liquefied petroleum gas fuel permittee) (from Form PT-101, line 29)						1				
2	Diesel motor fuel (registered as a distributor of diesel motor fuel) (from Form PT-102, line 48)										
3	3 Residuals (registered as a residual petroleum product business)										
(from Form PT-103, line 27)											
4	4 Tax on kero-jet fuel (registered as a distributor of diesel motor fuel, distributor of kero-jet fuel only, or as an aviation fuel business) (from Form PT-104, line 17)										
								,			
5 Electric corporations (from Form PT-105, line 3)								1)	
6	Retailers of non-highway diesel motor fuel only (registered as a retailer of non-highway diesel motor fuel only) (from Form PT-106, line 28)										
7			f tax due (add lines 1 through 6)								
8	This line intentionally left blank						8				
9	Tax due (enter amount from line 7)						9				
10	Refund/reimbursement from Form PT-100-B (attach Form PT-100-B)						10				
11	Balanc	Balance due (add lines 9 and 10; if an overpayment, enter 0 and enter the overpayment amount on line 17 below)									
12		Current period electronic funds transfer or certified check payment already made (mark appropriate box)									
	A based on actual tax due for the period April 1 through April 22, 2025										
	or							L			
	- based on last year's comparable period (April 2024)							<u> </u>		<u> </u>	
	Net balance due (subtract line 12 from line 11)										
		Penalties (see instructions)								-	
		nterest (see instructions) Total amount due (add lines 13, 14, and 15)								_	
							16	_			
	-	-	nent (see line 11)								
			ntentionally left blank			_	_				
19			be refunded (enter amount from line 17)		_						
	I am a sales tax exempt organization and not subject to the Article 13-A tax on petroleum businesses (see instructions). My exemption number is										
I се	rtify tha	t th	s business is duly licensed or registere	d to deal in each of the p	orodu	icts that are being rep	orted a	nd th	at this return,		
including any accompanying riders, is to the best of my knowledge and belief true, correct, and complete.											
Δ	uthoriz	ed	Signature of authorized person		Offic	cial title					
persor									Date		
	Paid	Firm's name (or yours if self-employed) Firm's EIN					P	eparer	's PTIN or SSN		
pr	eparer use	Sig	nature of individual preparing this return Address City					S	I I I I State ZIP code		
only (see instr.)		Email address of individual preparing this return Preparer					YTPRIN		Date		
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