

PT-100 (4/21) Department of Taxation and Finance Petroleum Business Tax Return Tax Law – Articles 12-A and 13-A

Use	e this form to report transactions for the month of A	pril 2021. This return mus	t be filed by May 20, 2021		-	
Employer identification number (EIN) Business telephone number		er Mandate to use Petroleur	Mandate to use Petroleum Business Tax Web File – Most			
Legal name filers fall under this required (see instructions).						
DB	Ā	mation	-			
Str	eet	ess lation ee				
Cit	y, state, ZIP code	<i>nation</i> i	n			
	ad Form PT-100-I, Instructions for Form PT-100, ca					
Ра	yment – Attach your check or money order payable Mail to: NYS TAX DEPARTMENT, PO BC	in U.S. funds to: Commiss X 15197, ALBANY NY 12	ioner of Taxation and Fin 212-5197	ance.	Payment enclosed	
Тур	oe of filer – Mark an X in all boxes that apply. You mus	(ed.	Totals			
1	[Motor fuel (registered as a distributor of motor (from Form PT-101, line 29)			1		
2	Diesel motor fuel (registered as a distributo (from Form PT-102, line 48)			2		
3	Residuals (registered as a residual petroleum p	product business)				
	(from Form PT-103, line 27)			3		
4	Tax on kero-jet fuel (registered as a distrib or as an aviation fuel business) (from Form PT-104,			4		
_						
	Electric corporations (from Form PT-105,			5)
6	Retailers of non-highway diesel model diesel motor fuel only) (from Form PT-106, line 28)					
7	Subtotal of tax due (add lines 1 through 6)			7		
	Credits from prior month's return					
	-					
	Tax due after credits (subtract line 8 from line 7)					
11	Refund/reimbursement from Form PT-100-B (attach Form PT-100-B)					
11	Balance due (add lines 9 and 10; if an overpayment, enter 0 and enter the overpayment amount on line 17 below) Current period electronic funds transfer or certified check payment already made (mark appropriate box)					
12	A - based on actual tax due for the period					
	or					
	E - based on last year's comparable perio	d (April 2020)		12		
13	Net balance due (subtract line 12 from line 11)					
	Penalties (see instructions)					
15	Interest (see instructions)					
	Total amount due (add lines 13, 14, and 15)			16		
	Overpayment (see line 11)					
18	Amount to be credited to next month's return		8	-		
	Amount to be refunded (see instructions)					
	I am a sales tax exempt organization and not subject to My exemption number is		eum businesses (see instruction	ıs).		
ce	ertify that this business is duly licensed or registered	to deal in each of the pro	ducts that are being repor	ted ar	nd that this return	
	luding any accompanying riders, is to the best of my					
	Signature of authorized person	-	Official title			
	uthorized					

Authorizo person	Email address of authorized person			Date	
Paid preparer use	Firm's name (or yours if self-employed) Signature of individual preparing this return	Address	Firm's EIN	Preparer's F	PTIN or SSN
only (see instr.)	Email address of individual preparing this return		Preparer's NYTPRIN	NYTPRIN I excl. code	Date

