

PT-100 (7/21) Department of Taxation and Finance Petroleum Business Tax Return Tax Law – Articles 12-A and 13-A

0721 For office use only

	B					
	this form to report transactions for the month of Ju					
En	Employer identification number (EIN) () Business telephone number () Business Tax Web File – N					
Legal name filers fall under this requirements (see instructions).						
DB	4		Change of business inform You can update your addre		-	
Str	eet					
by visiting our website. See						
City, state, ZIP code Change of business information Form PT-100-I.						
	d Form PT-100-I, Instructions for Form PT-100, car				1	
Ра	ment – Attach your check or money order payable i Mail to: NYS TAX DEPARTMENT, PO BO	n U.S. funds to: <i>Commissic</i> X 15197, ALBANY NY 122	oner of Taxation and Fin 12-5197	ance.	Payment enclose	ed
Тур	e of filer – Mark an X in all boxes that apply. You must	submit the appropriate attac	hments for each box mark	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 distributor	,				
	(from Form PT-102, line 48)			2		
3	Residuals (registered as a residual petroleum p				_	
	(from Form PT-103, line 27)			3		
4	Tax on kero-jet fuel (registered as a distribu					
	or as an aviation fuel business) (from Form PT-104,	line 17)		4		
5	Electric corporations (from Form PT-105,	line 3)		5	(
	Retailers of non-highway diesel mo					
	diesel motor fuel only) (from Form PT-106, line 28) .			6		
7	Subtotal of tax due (add lines 1 through 6)			7		
8	Credits from prior month's return			8		
9	Tax due after credits (subtract line 8 from line 7)			9		
10	Refund/reimbursement from Form PT-100-B (attack	h Form PT-100-B)		10		
11	Balance due (add lines 9 and 10; if an overpayment, enter	er 0 and enter the overpayment	amount on line 17 below)	11		
12	Current period electronic funds transfer or certified	l check payment already m	ade (mark appropriate box)			
	A - based on actual tax due for the period	July 1 through July 22, 202	1			
	or					
	E - based on last year's comparable period					
13	Net balance due (subtract line 12 from line 11)			13		
14	Penalties (see instructions)			14		
15	Interest (see instructions)			15		
16	Total amount due (add lines 13, 14, and 15)			16		
17	Overpayment (see line 11)			-		
18	Amount to be credited to next month's return			-		
19	Amount to be refunded (see instructions)					
	I am a sales tax exempt organization and not subject to the My exemption number is	the Article 13-A tax on petroleu	m businesses (see instruction	s).		
l ce	rtify that this business is duly licensed or registered	to deal in each of the prod	ucts that are being report	ted ar	nd that this retu	rn.
	uding any accompanying riders, is to the best of my	•	•	25 01		,
	Signature of authorized person	-	icial title			

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

