

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 Ser	otember 2022. This return	must be	filed by October 20	2022	2.		
	Employer identification number (EIN) Business telephone number Mandate to use Petroleu				ı	_		
Image: Legal name Image: Business Tax Web File – N filers fall under this requirem (see instructions).								
DBA Change of business inform						-		
You can update your addre street and other business informa								
by visiting our website. See						in		
City, state, ZIP code Change of business information Form PT-100-I.								
	ad Form PT-100-I, <i>Instructions for Form PT-100</i> , ca							
Ра	yment – Attach your check or money order payable Mail to: NYS TAX DEPARTMENT, PO BO Mail to: NYS TAX DEPARTMENT, PO BO				ance.	Payment enclosed		
Тур	e of filer – Mark an X in all boxes that apply. You mus	st submit the appropriate at	tachmen	ts 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 distribute							
	(from Form PT-102, line 48)				2			
3	Residuals (registered as a residual petroleum							
	(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	, line 17)			4			
5	Electric corporations (from Form PT-105	, line 3)			5	()	
6	Retailers of non-highway diesel me	otor fuel only (registere	ed as a re	tailer of non-highway				
	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	Fax due after credits (subtract line 8 from line 7)							
10	Refund/reimbursement from Form PT-100-B (atta	10						
11	Balance due (add lines 9 and 10; if an overpayment, en	11						
12	Current period electronic funds transfer or certifie							
	A - based on actual tax due for the period							
	or							
	E based on last year's comparable period							
	Net balance due (subtract line 12 from line 11)				13			
	Penalties (see instructions)				14			
	Interest (see instructions)				15			
	Total amount due (add lines 13, 14, and 15)		<u></u>		16			
	Overpayment (see line 11)	F	17		4			
	Amount to be credited to next month's return	H H H H H H H H H H H H H H H H H H H			-			
19								
	rtify that this business is duly licensed or registere uding any accompanying riders, is to the best of m				ed ar	nd that this return,		

Authorized person		Signature of authorized person		Offic	cial title	Э					
		Email address of authorized person					Date				
Paid	Firm	m's name (or yours if self-employed)			Firm's EIN Preparer's						s PTIN or SSN
preparer											
use	Sign	nature of individual preparing this return	Address	City					S	tate ZIP code	
only	Email address of individual preparing this return		L	Preparer's NYTPRIN NYTPRIN				NYTPRIN		Date	
(see instr.)									excl. code		

