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

		ntification numbe	r (FIN)	oi Oct		lephone num		ate to use Pe		202	۷.		
( ) Business Tax Web Fil							File - M						
Legal name filers fall under this require (see instructions).									requirem	ent			
DBA  Change of business infor You can update your addi											-		
Street and other business inform										tion			
City, state, ZIP code by visiting our website. Se Change of business information of the properties of											in		
Rea	ad Form I	PT-100-I, Instru	ctions for Form PT-1	00, cai	efully. Keep a	copy of thi			your re	corc	ls.		
Payment – Attach your check or money order payable in U.S. funds to: Commissioner of Taxation and Final Mail to: NYS TAX DEPARTMENT, PO BOX 15197, ALBANY NY 12212-5197												yment enclose	∍d
Type of filer – Mark an X in all boxes that apply. You must submit the appropriate attachments for each box mark									x marke	d.		Totals	
	<b>■</b> Mo	tor fuel (regis	tered as a distributor of	motor	fuel or as a liqu	efied petrole	ım gas fue	permittee)		_			
_			ne 29)							1			_
2	Diesel motor fuel (registered as a distributor of diesel motor fuel)  (from Form PT-102, line 48)									2			
3	Residuals (registered as a residual petroleum product business)  (from Form PT-103, line 27)									3			
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)									4	4		
5 Electric corporations (from Form PT-105, line 3)										5	(		)
6	■ Ref	tailers of no	n-highway diese	el mo	tor fuel on	l <b>ly</b> (registere	d as a reta	iler of non-hi	ghway				
		•	) (from Form PT-106, lir							6			
		•	d lines 1 through 6)							7			
		Credits from prior month's return								8			
		Tax due after credits (subtract line 8 from line 7)								9			
		efund/reimbursement from Form PT-100-B (attach Form PT-100-B)								10	lacksquare		
		nce due (add lines 9 and 10; if an overpayment, enter <b>0</b> and enter the overpayment amount on line 17 below)								11			
12		urrent period electronic funds transfer or certified check payment already made <i>(mark appropriate box)</i> - based on actual tax due for the period October 1 through October 22, 2022											
	A	based on a	ctual tax due for the p	period	October 1 thre	ough Octob	er 22, 202	22					
	or	¬				0.41					L		
		- based on last year's comparable period (October 2021)									_		
		et balance due (subtract line 12 from line 11)								13	_		
		alties (see instructions)							14	_		+-	
		rest (see instructions)							15			+-	
10	Overno	iount due (ada i	ines 13, 14, and 15) 11)				17		T	16			
			to next month's retu				18						
			(see instructions)			_	19						
			rganization and not sub					esses (see ins	structions	:).			
Ш	My exem	ption number is_		<u> </u>									
			duly licensed or regi							ed ar	nd tha	at this retui	'n,
ncl	uding an		g riders, is to the bes	t of my	/ knowledge a			i, and comp	lete.				
Α	uthorize		thorized person			(	Official title						
	person		of authorized person									Date	
	Dai: 11	Firm's name (	o if oalf ample (ad)				Eirm's FI	N		D	norer'	o DTIN or CO	N
		Firm's name <i>(or your</i> s	» іі seii-empioyea)				Firm's EI	IN		Pre	parer: 	s PTIN or SS	<u> </u>
preparer use		Signature of individual preparing this return Address C						City			S	tate ZIP cod	le
(	only	Email address of inc	dividual preparing this retur	'n			Preparer's N	YTPRIN	NYTI	PRIN		Date	
(se	e instr.)								excl.	code			