

## PT-100 (11/22) Department of Taxation and Finance Petroleum Business Tax Return Tax Law – Articles 12-A and 13-A

	-	mhou 2022 This watering	the filed by December Of		22	
	e this form to report transactions for the month of <b>Noven</b>				.2.	
Employer identification number (EIN) Business telephone number (BIN) Business Tax Web File – Mandate to use Petroleum						
Legal name filers fall under this requirem (see instructions).						
DB	A	matior ess	n —			
Str	eet	ation				
0.1		e	in .			
	y, state, ZIP code	nation				
Rea	ad Form PT-100-I, <i>Instructions for Form PT-100</i> , care	efully. Keep a copy of this	completed form for your	recor		
Pa	yment – Attach your check or money order payable in Mail to: NYS TAX DEPARTMENT, PO BOX			ance	Payment enclosed	
Тур	e of filer – Mark an X in all boxes that apply. You must s	submit the appropriate atta	chments for each box mark	ked.	Totals	
1	<b>Motor fuel</b> (registered as a distributor of motor fu (from Form PT-101, line 29)	1				
- <b>`</b>	Diesel motor fuel (registered as a distributor of			-		
2	(from Form PT-102, line 48)	,		2		
3	<b>Residuals</b> (registered as a residual petroleum pro					
	(from Form PT-103, line 27)			3		
4	Tax on kero-jet fuel (registered as a distribute					
	or as an aviation fuel business) (from Form PT-104, lin	ne 17)		4		
5	Electric corporations (from Form PT-105, lit	ne 3)		5	(	
6	Retailers of non-highway diesel mot			-		
-	diesel motor fuel only) (from Form PT-106, line 28)			6		
7	Subtotal of tax due (add lines 1 through 6)			7		
	Credits from prior month's return			8		
9	3 Tax due after credits (subtract line 8 from line 7)					
10	Refund/reimbursement from Form PT-100-B (attach Form PT-100-B)					
11	Balance due (add lines 9 and 10; if an overpayment, enter <b>0</b> and enter the overpayment amount on line 17 below)					
12	Current period electronic funds transfer or certified of					
	A - based on actual tax due for the period N					
	or					
	E - based on last year's comparable period	(November 2021)		12		
13	Net balance due (subtract line 12 from line 11)			13		
14	Penalties (see instructions)					
15	Interest (see instructions)			15		
	Total amount due (add lines 13, 14, and 15)			16		
17	Overpayment (see line 11)		•	_		
	Amount to be <b>credited</b> to next month's return			_		
19	Amount to be <b>refunded</b> (see instructions)					
	I am a sales tax exempt organization and not subject to th	e Article 13-A tax on petrole	um businesses (see instruction	1s).		
	My exemption number is					
1 00	minute the business is duly beened or registered t	a dealur acab at the prov	wate that are being repor	tod o	ng that this raturn	

I certify that this business is duly licensed or registered to deal in each of the products that are being reported and that this return, including any accompanying riders, is to the best of my knowledge and belief true, correct, and complete.

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

