

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

1024 For office use only

		n to report transactions for the month of	of Octo						4.	4		
Employer identification number (EIN) Business telephone number () Legal name Business telephone number () Business Tax Web File – filers fall under this require								le – Mos				
(see instructions).												
DBA Change of business inform									on –			
Street You can update your address and other business information by visiting our website. Se									n			
City, state, ZIP code Change of business information Principle Change of Change of Description Principle Change of Change of Change of Description Principle Change of Description Pr									on in			
Read Form PT-100-I, Instructions for Form PT-100, carefully. Keep a copy of this completed form for your records										i.		
Payment – Attach your check or money order payable in U.S. funds to: Commissioner of Taxation and Finance. Mail to: NYS TAX DEPARTMENT, PO BOX 15197, ALBANY NY 12212-5197											nt enclosed	
Type of filer – Mark an X in all boxes that apply. You must submit the appropriate attachments for each box market											Totals	
1		otor fuel (registered as a distributor of m Form PT-101, line 29)					,	1				
2	Diesel motor fuel (registered as a distributor of diesel motor fuel)											
	(from Form PT-102, line 48)											
3	Residuals (registered as a residual petroleum product business) (from Form PT-103, line 27)								3			
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)											
5	■ Ele	ectric corporations (from Form F	PT-105,	, line 3)				;	5	()
6	6 Retailers of non-highway diesel motor fuel only (registered as a retailer of non-highway											
	diesel motor fuel only) (from Form PT-106, line 28)								3			
7	Subtotal of tax due (add lines 1 through 6)								7			
8	Credits from prior month's return								3			
9	Tax due after credits (subtract line 8 from line 7)								9			
10	Refund	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)										
12	Current period electronic funds transfer or certified check payment already made (mark appropriate box)											
	A based on actual tax due for the period October 1 through October 22, 2024											
or												
	- based on last year's comparable period (October 2023)											
	Net balance due (subtract line 12 from line 11)											
		Penalties (see instructions)										
	Interest (see instructions) Total amount due (add lines 13, 14, and 15)								_			_
	_							10	,			
	Amount to be credited to next month's return											
		Amount to be refunded (see instructions)										
		sales tax exempt organization and not sub					see instru	ctions).				
		mption number is				,		,				
l ce	rtify tha	t this business is duly licensed or reg	istere	d to deal in each of the	oroc	ducts that are b	eina re	ported	and	that th	is return.	
		ny accompanying riders, is to the bes									,	
	41!	Signature of authorized person			Of	ficial title						
Authorize person										Da		
		Email address of dutiforized potenti										
	Paid	Firm's EIN			Prep	arer's PTI	IN or SSN					
preparer use		Signature of individual preparing this return Address City								State	ZIP code	
only		Email address of individual preparing this return				oparor's NVTDDIN		NVTDD	INI		nto.	
(see instr.)		Email address of individual preparing this return				reparer's NYTPRIN NYTPRIN Date						