

NEW YORK STATE PT-100 (12/24) Department of Taxation and Finance Petroleum Business Tax Return Tax Law – Articles 12-A and 13-A

Use	this form to report transactions for the month of Dece	mber 2024 This return mu	st be filed by January 21	025	-		
Use this form to report transactions for the month of December 2024. This return must be filed by January 21, 2 Employer identification number (EIN) Business telephone number () Business Tax Web File – N Businest File – N Busi							
Legal name filers fail under this requirem (see instructions).							
DBA Change of business inform You can update your addre							
Street and other business information and other business and other business and other business and business							
by visiting our website. See City, state, ZIP code Change of business information Form PT-100-I.							
Rea	d Form PT-100-I, Instructions for Form PT-100, care	efully. Keep a copy of this	completed form for your r	ecord	ls.		
Pay	/ment – Attach your check or money order payable ir Mail to: NYS TAX DEPARTMENT, PO BO			ance.	Paymer	nt enclosed	
Тур	e of filer – Mark an X in all boxes that apply. You must	submit the appropriate atta	chments for each box mark	ed.		Totals	
1	1 Motor fuel (registered as a distributor of motor fuel or as a liquefied petroleum gas fuel permittee) (from Form PT-101, line 29)						
2	Diesel motor fuel (registered as a distributor (from Form PT-102, line 48)	of diesel motor fuel)		2			
3	Residuals (registered as a residual petroleum pr (from Form PT-103, line 27)	roduct business)		3			
4	Tax on kero-jet fuel (registered as a distribu						
	or as an aviation fuel business) (from Form PT-104, I			4			
5	Electric corporations (from Form PT-105, I	ine 3)		5	(
6	Retailers of non-highway diesel mot	or fuel only (registered	l as a retailer 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	Tax due after credits (subtract line 8 from line 7)			9			
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 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 I	December 1 through Dece	ember 22, 2024				
	or						
	E - based on last year's comparable period						
	Net balance due (subtract line 12 from line 11)			13 14			
	4 Penalties (see instructions)						
	Interest (see instructions)			15			
	Total amount due (add lines 13, 14, and 15)			16			
	Overpayment (see line 11)			-			
	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	ne Article 13-A tax on petrole	um businesses (see instruction	s).			
l ce	rtify that this business is duly licensed or registered	to deal in each of the proc	ducts that are being report	ed a	nd that th	nis return.	

including any accompanying rules, is to the best of my knowledge and belief true, correct, and complete.										
	Signature of authorized person		Official title							
Authoriz	ed									
person	Email address of authorized person				Date					
Paid	Firm's name (or yours if self-employed)		Firm's EIN Prepa		er's PTIN or SSN					
preparer										
use	Signature of individual preparing this return	Address	City	Sta	State ZIP code					
only										
(see instr.)	Email address of individual preparing this return		Preparer's NYTPRIN	NYTPRIN	Date					
				excl. code						

