



New York State 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 December 2012 . This return must be filed by January 22, 2013 .								
Federal employer identification number (EIN)	Business telephone number	Change of business information -						
	()	You can update your address and other business information						
Legal name		by visiting our Web site (see						
		Need help? in Form PT-100-I).						
DBA		Select the option to change your address for further instructions.						
		For more information, see Change						
Street		of business information in the						
		instructions.						

City, state, ZIP code

Read Form PT-100-I, Instructions for Form PT-100, carefully. Keep a copy of this completed form for your records.

Pa	yment — Attach your check or money order payable to: Commissioner of Taxation and Finance. Mail to: NYS TAX DEPARTMENT, PO BOX 1833, ALBANY NY 12201-1833		Payment enclosed	
Тур	e of filer – Mark an X in all boxes that apply. You must submit the appropriate attachments for each box mar	ked.	Totals	
1	Motor fuel (registered as a distributor of motor fuel or as a liquefied petroleum gas fuel permittee) (from Form PT-101, line 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	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		
5		5	()
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)	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)	10		
11	Balance due (add lines 9 and 10; if an overpayment, enter 0 and enter the overpayment amount on line 17 below)	11		
12	Current period electronic funds transfer or certified check payment already made <i>(mark appropriate box)</i> A based on actual tax due for the period December 1 through December 22, 2012 or			
	E - based on last year's comparable period (December 2011)	12		
13	Net balance due (subtract line 12 from line 11)	13		
	Penalties (see instructions)	14		
	Interest (see instructions)	15		
16		16		
17				1
	Amount to be credited to next month's return			
	Amount to be refunded (see instructions)	1		
	I am a sales tax exempt organization and not subject to the Article 13-A tax on petroleum businesses (see instruction My exemption number is	ns).		
	rtify that this business is duly licensed or registered to deal in each of the products that are being repounding any accompanying riders, is to the best of my knowledge and belief true, correct, and complete.		and that this returr	٦,
	Signature of authorized person Official title			

Authorized person		Signature of authorized person		Official title					
		E-mail address of authorized person				Date			
Faiu	Firm's name (or yours if self-employed)		Firm's EIN		Preparer's PTIN or SSN				
preparer use	Signa	ature of individual preparing this return	Address			City	Sta	ate	ZIP code
only (see instr.)	E-ma	il address of individual preparing this return				Preparer's NYTPRIN		Date	