(see instr.)

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

For office use only

	form to report transactions for the month of De		t be filed by January 20	, 201	6.	
Federal employer identification number (EIN)  Business telephone number ( )  Change of business inform You can update your addrest other business information			ess ar			
Legal name visiting our Web site (see A help? in Form PT-100-I). Se				Veed elect		
DBA the option to change your action for further instructions. For more information, see <i>Chan</i>						
Street in business information in the instructions.						
City, state,	, ZIP code		-			
Read Forr	m PT-100-I, Instructions for Form PT-100, ca	arefully. Keep a copy of this co	mpleted form for your r	ecor	ds.	
Payment	<ul> <li>Attach your check or money order payable Mail to: NYS TAX DEPARTMENT, PO Box</li> </ul>	in U.S. funds to: <b>Commissio</b> n OX 1833, ALBANY NY 12201-	<b>er of Taxation and Fin</b> 1833	ance	Payment enclosed	
Type of fi	ler – Mark an X in all boxes that apply. You mu	st submit the appropriate attach	ments for each box mark	ed.	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		
	Electric corporations (from Form PT-105			5	• (	
6 <b>■</b> R	Retailers of non-highway diesel m	otor fuel only (registered as	a retailer of non-highway			
	iesel motor fuel only) (from Form PT-106, line 28) otal 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		
· · · · · · · · · · · · · · · · · · ·				11		
Current period electronic funds transfer or certified check payment already made (mark appropriate box)  A based on actual tax due for the period December 1 through December 22, 2015						
or						
E	- based on last year's comparable period			12		
<ul><li>13 Net balance due (subtract line 12 from line 11)</li><li>14 Penalties (see instructions)</li></ul>				13		
14 Penalties (see instructions)  15 Interest (see instructions)				14 15		
16 Total amount due (add lines 13, 14, and 15)				16		
	payment (see line 11)			10		
	unt to be <b>credited</b> to next month's return					
	unt to be <b>refunded</b> (see instructions)					
l am a	a sales tax exempt organization and not subject to temption number is		businesses (see instruction	s).		
	at this business is duly licensed or registere	ed to doal in each of the produc	ete that are being report	od a	and that this return	
	any accompanying riders, is to the best of m			.eu a	nu mai mis return,	
noidaing (	Signature of authorized person	Official ti				
Authori	ized					
perso	E-mail address of authorized person				Date	
Paid preparer	Firm's name (or yours if self-employed)		irm's EIN	Pr	reparer's PTIN or SSN	
use	Signature of individual preparing this return	Address	City		State ZIP code	
only	E-mail address of individual preparing this return		Preparer's NYTPRI	N	Date	