

(11/19) 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 Nove | mber 2019. This return must | be filed by December 20 | , 201 | 9. | | |
|--|---|--|---|-------|------------|------------|--|
| Employer identification number (EIN) Business telephone number Mandate to use Petroleur | | | | | | | |
| Legal name () Business Tax Web File – filers fall under this require (see instructions). | | | | | | | |
| DB | Ą | natior | 1 – I | | | | |
| Str | eet | ess ation | | | | | |
| by visiting our website. Se | | | | | | | |
| City | <i>ı</i> , state, ZIP code | ation | in | | | | |
| Rea | d Form PT-100-I, Instructions for Form PT-100, car | efully. Keep a copy of this co | ompleted form for your r | ecor | ds. | | |
| Pa | /ment – Attach your check or money order payable in Mail to: NYS TAX DEPARTMENT, PO BO. | n U.S. funds to: Commission X 15197, ALBANY NY 1221: | n er of Taxation and Fin a 2-5197 | ance | Paymen | t enclosed | |
| Тур | e of filer – Mark an X in all boxes that apply. You must | submit the appropriate attach | ments for each box mark | ed. | | Totals | |
| 1 | Motor fuel (registered as a distributor of motor f (from Form PT-101, line 29) | | | 1 | | | |
| 2 | | | | · · | | | |
| 2 | (from Form PT-102, line 48) | 2 | | | | | |
| 3 | | | | | | | |
| | (from Form PT-103, line 27) | 3 | | | | | |
| 4 | Tax on kero-jet fuel (registered as a distribu | | | | | | |
| | or as an aviation fuel business) (from Form PT-104, | line 17) | | 4 | | | |
| - | Electric corporations (from Electric States | (mag O) | | _ | | | |
| | Electric corporations (from Form PT-105,) | | | 5 | | | |
| 6 | Retailers of non-highway diesel mor 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 (attack | 10 | | | | | |
| 11 | Balance due (add lines 9 and 10; if an overpayment, enter | 11 | | | | | |
| 12 | Current period electronic funds transfer or certified | | | | | | |
| | A - based on actual tax due for the period | November 1 through Novem | ber 22, 2019 | | | | |
| | or | | | | | | |
| | E - based on last year's comparable period | | | | | | |
| | Net balance due (subtract line 12 from line 11) | | | 13 | | | |
| | Penalties (see instructions) | | | 14 | | | |
| | Interest (see instructions) | | | 15 | | | |
| | Total amount due (add lines 13, 14, and 15) | | | 16 | | | |
| | Overpayment (see line 11) | | | - | | | |
| 18 | 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 t My exemption number is | he Article 13-A tax on petroleun | n businesses (see instruction | s). | | | |
| l ce | rtify that this business is duly licensed or registered | to deal in each of the produ | cts that are being report | ed a | nd that th | is return. | |
| | uding any accompanying riders, is to the best of my | | | | | | |

| Authorized person | | Signature of authorized person | Official title | | | | |
|-------------------|---|------------------------------------|----------------|--------------------|------------|--------------|--|
| | | Email address of authorized person | | | Date | | |
| Paid | Firm's name (or yours if self-employed) | | | Firm's EIN | Preparer's | PTIN or SSN | |
| preparer | Signature of individual preparing this return Address | | | | | | |
| use | | | Address | City Sta | | ate ZIP code | |
| only | | | | Preparer's NYTPRIN | NYTPRIN | Date | |
| (see instr.) | | | | | excl. code | | |

