

PT-100 (6/21) Department of Taxation and Finance Petroleum Business Tax Return Tax Law – Articles 12-A and 13-A

For office use only 0621

Тах	law-	Articles	12-A	and	13-A
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Use	this form to report transactions for the month of Jun	e 2021. This return must	be filed by July 20, 2021		1		
Employer identification number (EIN) Business telephone number Mandate to use Petroleum							
Legal name Business Tax Web File – M filers fall under this requirem (see instructions).							
DBA Change of business inform					ı —		
Stre	pet		You can update your addr and other business inform				
		e					
	, state, ZIP code		Change of business inform Form PT-100-I.				
	d Form PT-100-I, Instructions for Form PT-100, care	· · · · ·					
Pay	/ment – Attach your check or money order payable in Mail to: NYS TAX DEPARTMENT, PO BOX			ance.	Payment enclosed		
Тур	e of filer – Mark an X in all boxes that apply. You must s	submit the appropriate attac	hments for each box mark	ked.	Totals		
1	Motor fuel (registered as a distributor of motor fue (from Form PT-101, line 29)			1			
2	Diesel motor fuel (registered as a distributor of	of diesel motor fuel)					
	(from Form PT-102, line 48)	,		2			
3	Residuals (registered as a residual petroleum pro	oduct business)					
	(from Form PT-103, line 27)	,		3			
4	Tax on kero-jet fuel (registered as a distribute						
	or as an aviation fuel business) (from Form PT-104, lir	ne 17)		4			
					,		
	Electric corporations (from Form PT-105, lin			5	()	
6	Retailers of non-highway diesel mote			,			
	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					
	Tax due after credits (subtract line 8 from line 7)	9					
10	Refund/reimbursement from Form PT-100-B (attach	10					
11	Balance due (add lines 9 and 10; if an overpayment, enter	11					
12	Current period electronic funds transfer or certified of						
	A based on actual tax due for the period June 1 through June 22, 2021						
	or						
	E - based on last year's comparable period	,					
13	Net balance due (subtract line 12 from line 11)	13					
14	Penalties (see instructions)	14					
15	Interest (see instructions)	15					
	6 Total amount due (add lines 13, 14, and 15)						
17	Overpayment (see line 11)			_			
	18 Amount to be credited to next month's return 18						
19 Amount to be refunded (see instructions)							
	I am a sales tax exempt organization and not subject to the	e Article 13-A tax on petroleu	m businesses (see instruction	ıs).			
	My exemption number is						

I certify that this business is duly licensed or registered to deal in each of the products that are being reported and that this return, including any accompanying riders, is to the best of my knowledge and belief true, correct, and complete.

Authoriz	ed	Signature of authorized person		Of	ficial t	itle							
person	۱	Email address of authorized person											Date
Paid	Firm's name (or yours if self-employed)			Firm's EIN Prepa						er's	er's PTIN or SSN		
preparer													
use	Sigr	nature of individual preparing this return	Address		City					State ZIP code			
only (see instr.)	Ema	ail address of individual preparing this return		Pre	Preparer's NYTPRIN NYTPRII					Date			
(000 mom)										excl. co	de		

