0722
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For office use only

STATE	(7/22) Tax Law	/ – Articles 12-A and 13-A						
Use this form to report transactions for the month of <b>July 2022</b> . This return must be filed by <b>August 22</b> , 202							$\exists$	
Employer identification number (EIN)  Business telephone number  ( )  Legal name  Business telephone number  ( )  Business Tax Web File -  filers fall under this require					File – M	lost		
DBA				(see instructions).  Change of busines			-	
Street You can update your addres and other business informati by visiting our website. See						tion		
City, state, ZIP	code			Change of busines Form PT-100-I.			n	
Read Form PT	-100-I, Instructions for Form PT-1	00, carefully. Keep a copy of t	his con	npleted form for	your re	cord	S	
Payment - Att	tach your check or money order pa lail to: NYS TAX DEPARTMENT, l	ayable in U.S. funds to: <i>Commi</i> PO BOX 15197, ALBANY NY	i <b>ssione</b> 12212-	e <b>r of Taxation a</b> -5197	nd Fina	nce.	Payment enclosed	
Type of filer -	Mark an X in all boxes that apply. Yo	ou must submit the appropriate	attachm	nents for each bo	x marke	d.	Totals	
1 Moto	or fuel (registered as a distributor of Form PT-101, line 29)	f motor fuel or as a liquefied petro	leum ga	as fuel permittee)		1		
	el motor fuel (registered as a di					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 Elect	tric corporations (from Form F	PT-105, line 3)				5	<b>.</b> (	
6 Retai	ilers of non-highway diesemotor fuel only) (from Form PT-106, lin	el motor fuel only (registe	ered as	a retailer of non-h	ighway	6		
	of tax due <i>(add lines 1 through 6)</i>	*				7		
	om prior month's return					8		
	fter credits (subtract line 8 from line					9		
	imbursement from Form PT-100-E							
	ue (add lines 9 and 10; if an overpaym							
	eriod electronic funds transfer or c				-			
	- based on actual tax due for the		-	- (	,			
or		3 - 7 7						
E	- based on last year's comparable	e period (July 2021)				12		
13 Net balance due (subtract line 12 from line 11)						13		
<b>14</b> Penalties	(see instructions)					14		
15 Interest (se	ee instructions)					15		
	unt due (add lines 13, 14, and 15)					16		
<b>17</b> Overpaym	nent (see line 11)		17					
18 Amount to	be credited to next month's retu	ırn	18					
<b>19</b> Amount to	be refunded (see instructions)		19					
l am a sales	s tax exempt organization and not sub	oject to the Article 13-A tax on petr	roleum k	ousinesses (see in:	structions	5).		
	ion number is	·						
certify that thi	is business is duly licensed or reg	jistered to deal in each of the p	oroduct	s that are being	reporte	ed ar	d that this return,	
ncluding any a	accompanying riders, is to the bes	st of my knowledge and belief	true, co	orrect, and comp	olete.			
Authorized	Signature of authorized person		Official	title				
person	Email address of authorized person						Date	
Paid Firr	m's name (or yours if self-employed)		Fire	m's EIN		Pre	eparer's PTIN or SSN	
preparer Sign	nature of individual preparing this return	Address		City			State ZIP code	

Preparer's NYTPRIN

NYTPRIN

excl. code |

Date

use only

(see instr.)

Email address of individual preparing this return