

New York State and Local Sales and Use Tax Return



0688

**QUARTERLY
FOR PART-QUARTERLY FILERS**

Use this form to report only transactions for the period
SEPTEMBER 1, 1987 — NOVEMBER 30, 1987

Use labeled Form and return envelope for filing your return

If there have been any changes in your business name, ID number, mailing address or business address, telephone number or owner/officer information you must follow the instructions on page 3 of Form ST-810-I, *Instructions for ST-810 (Quarterly Return for Part-Quarterly Filers)*. If no Form ST-810-I is enclosed, call 1-800-462-8100 (from out of state (518) 438-1073) to request Form DTF-95, *Change of Business Information*.

Type of Business

If you are reporting sales tax on this return for more than one business location, check here.

If business has been discontinued, check here and attach Certificate of Authority with back completed. Then continue with instructions below, and complete the sections that apply to you.

If you had no taxable sales and made no purchase subject to use tax you must:

- Enter "NONE" in this box.
- Enter your gross sales in Box A below and enter "NONE" in Boxes B, C and D.
- Sign and date this return and mail it in the enclosed envelope.

THIS RETURN MUST BE FILED WHETHER OR NOT THERE IS TAX DUE

Complete Page 2 of this form before making entries below

| SUMMARY OF BUSINESS ACTIVITY | A | B | C | D |
|---|---|---|---|--|
| | Gross Sales and Services (to nearest dollar) | Taxable Sales and Services (to nearest dollar) | Purchases Subject to Use Tax (to nearest dollar) | Total credits claimed on Page 2 or Attached Schedules (dollars and cents) |
| 1. Sales and use taxes (total of column (e) Page 2 and totals from Schedules A, B, E, N, R and U, if filed) | | | | 1 \$ |
| 2a. Credits not claimed on Page 2 (attachments required) | 2a \$ | | | [REDACTED] |
| b. Total amount remitted on monthly sales tax returns (ST-809) (No receipt required) & any advance payments (If advance payments were made, attach Form ST-330) | 2b \$ | | | |
| c. Total of lines 2a and 2b | | | | 2c |
| 3. Sales and use taxes due (line 1 less line 2c) | | | | 3 \$ |
| 4. Add: Late filing charge (Penalty — See Page 3 for Penalty Computation Instructions. Interest—rate pursuant to Part 603 of the Tax Regulations.) | | | | 4 |
| 5. Amount due — including late filing charge (line 3 plus line 4) | | | | 5 \$ |

- Attach check or money order for the amount on line 5 payable to "New York State Sales Tax."
- Mail your return in the enclosed envelope to applicable P.O. Box on or before **DECEMBER 20, 1987**.

FOR OFFICE USE ONLY

| | |
|---|------------------|
| Signature of vendor | Telephone number |
| Title | Date |
| Signature of preparer, if other than vendor | Telephone number |
| Preparer's address | Date |

Did you complete Page Two of this form?

| TAXING JURISDICTION (a) | % RATE (b) | TAXABLE SALES AND SERVICES (to nearest dollar) (c) | PURCHASES SUBJECT TO USE TAX (to nearest dollar) (d) | SALES AND USE TAXES b x (c + d) (dollars and cents) (e) | CODE |
|----------------------------|------------------|---|---|--|-------------|
| NEW YORK STATE ONLY | 4 | | | | 0002 |
| Albany | 7 | | | | 0172 |
| Allegany | 8 | | | | 0215 |
| Broome | 7 | | | | 0312 |
| Cattaraugus - except | 8 | | | | 0499 |
| Olean (city) | 8 | | | | 0419 |
| Salamanca (city) | 8 | | | | 0429 |
| Cayuga | 7 | | | | 0502 |
| Chautauqua | 7 | | | | 0602 |
| Chemung - except | 7 | | | | 0792 |
| Elmira (city) | 7 | | | | 0712 |
| Chenango | 6 | | | | 0802 |
| Clinton - except | 7 | | | | 0992 |
| Plattsburgh (city) | 7 | | | | 0912 |
| Columbia | 7 | | | | 1008 |
| Cortland | 7 | | | | 1102 |
| Dutchess - except | 5¼ | | | | 1309 |
| Poughkeepsie (city) | 7¼ | | | | 1339 |
| Erie | 8 | | | | 1415 |
| Essex | 7 | | | | 1502 |
| Franklin | 7 | | | | 1602 |
| Fulton | 7 | | | | 1702 |
| Genesee - except | 7 | | | | 1892 |
| Batavia (city) | 7 | | | | 1822 |
| Greene | 7 | | | | 1912 |
| Hamilton | 7 | | | | 2002 |
| Jefferson | 7 | | | | 2202 |
| Lewis | 7 | | | | 2303 |
| Livingston | 7 | | | | 2402 |
| Madison - except | 7 | | | | 2582 |
| Oneida (city) | 7 | | | | 2526 |
| Monroe | 7 | | | | 2602 |
| Montgomery - except | 7 | | | | 2792 |
| Amsterdam (city) | 7 | | | | 2712 |
| Nassau - except | 8 | | | | 2848 |
| Glen Cove (city) | 8 | | | | 2824 |
| Niagara | 7 | | | | 2902 |
| Oneida - except | 7 | | | | 3002 |
| Rome (city) | 7 | | | | 3038 |
| Sherrill (city) | 7 | | | | 3048 |
| Utica (city) | 7 | | | | 3055 |
| Onondaga | 7 | | | | 3102 |
| Ontario- except | 7 | | | | 3272 |
| Canandaigua (city) | 7 | | | | 3232 |
| Geneva (city) | 7 | | | | 3242 |
| Orange - except | 6¼ | | | | 3305 |
| Newburgh (city) | 7¼ | | | | 3326 |
| Orleans | 7 | | | | 3472 |

PENALTY COMPUTATION

- A. For failure to file a return on time, even if no tax is due, the penalty is \$50.00.
- B. For failure to file a return on time with tax due, if the return is:
 1-60 days late, the penalty is 10% of the tax due for the first month plus 1% of the tax due for each month thereafter, but in no instance less than \$50.00, or
 61 or more days late, the penalty is the greatest of the following:
- 10% of the tax due for the first month plus 1% of the tax due for each month thereafter not to exceed 30% or
 - the lesser of \$100.00 or 100% of the tax due, or
 - \$50.00

RETURN ADDRESSES

| | | | |
|--|--|--|---|
| If you are participating in the New York/New Jersey Reciprocal Tax Agreement, attach Schedule NJ to your return | | | MAIL RETURN TO: P.O. Box 688 Albany, NY 12201 |
| If you are NOT participating in the New York/New Jersey Reciprocal Tax Agreement and your place of business is located in the county of: | | | MAIL RETURN TO: |
| ALBANY BROOME CHEMUNG CHENANGO CLINTON COLUMBIA DELAWARE DUTCHESS ESSEX FRANKLIN | FULTON GREENE HAMILTON HERKIMER JEFFERSON LEWIS MONTGOMERY ONEIDA OTSEGO RENSSELAER | SARATOGA SCHENECTADY SCHOHARIE SCHUYLER STEUBEN ST. LAWRENCE TIOGA TOMPKINS ULSTER WARREN WASHINGTON | P. O. Box 688 Albany, NY 12201 |
| BRONX ORANGE | PUTNAM ROCKLAND | SULLIVAN WESTCHESTER | All filers in these counties except Schedule R filers (motor fuel retailers): P. O. Box 3000 White Plains, NY 10602 Schedule R filers in these counties must mail this return to: P. O. Box 688 Albany, NY 12201 |
| NEW YORK COUNTY with ZIP CODES 10001-10019 RICHMOND | | | P. O. Box 2058 Church Street Station New York, NY 10008 |
| KINGS NEW YORK COUNTY with ZIP CODES 10020-10040 QUEENS | | | G. P. O. Box 5464 New York, NY 10087 |
| NASSAU | SUFFOLK | | P. O. Box 1866 Hicksville, NY 11802 |
| CAYUGA CORTLAND LIVINGSTON MADISON | MONROE ONONDAGA ONTARIO ORLEANS | OSWEGO SENECA WAYNE YATES | P. O. Box 4777 Syracuse, NY 13221 |
| ALLEGANY CATTARAUGUS | CHAUTAUQUA ERIE | GENESEE NIAGARA WYOMING | All filers in these counties except Schedule R filers (motor fuel retailers): P. O. Box 194 Buffalo, NY 14240 Schedule R filers in these counties must mail this return to: P. O. Box 4777 Syracuse, NY 13221 |
| If you are a vendor located out-of-state | | | MAIL RETURN TO: P. O. Box 688 Albany, NY 12201 |

PHONE**For forms or publications**

from within New York State, call toll free 1 800 462-8100
 from outside New York State, call 1 518 438-1073

For information

from within New York State, call toll free 1 800 CALL TAX (1 800 225-5829)
 from outside New York State, call 1 518 438-8581

Telephone assistance is available from 8 a.m. to 5 p.m.
 Monday through Friday.

WRITE

If you need to write, address your letter to:

New York State Tax Department
 Taxpayer Assistance Bureau
 W. A. Harriman Campus
 Albany, New York 12227