

New York State and Local Sales and Use Tax Return

ST-810
(11/89)

0690 Quarterly For Part-Quarterly Filers

Sales tax vendor identification number	Business telephone number ()
Legal name	
DBA	
Street	
City, state, ZIP code	

Change of Business Information
If there have been any changes in your business' name, ID number, mailing address, business address, telephone number or owner/officer/responsible person information, complete Form DTF-95, *Change of Business Information*. If no form is enclosed, call 1 800 462-8100 (from out of state (518) 438-1073) to request one.

Use labeled form and return envelope for filing your return.

Use this form to report only transactions for the period **September 1, 1989 — November 30, 1989**

Type of business	If you are reporting sales tax on this return for more than one business location, check here. <input type="checkbox"/>
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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. **Final Return**

If you had no taxable sales and made no purchases 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, FR, N, and U, if filed)				1 \$
2a Credits not claimed on page 2 (attachments required)		2a \$		
2b Total amount remitted on monthly sales tax returns (ST-809) (No receipt required) and any advance payments (If advance payments were made, attach Form ST-330)		2b \$		
2c Total of line 2a and line 2b			2c	
3 Sales and use taxes due (subtract line 2c from line 1)			3	\$
4 Late filing charge (penalty — See Page 3 for Penalty Computation Instructions. interest — rate pursuant to Section 1142 of the Tax Law.)			4	
5 Amount due — including late filing charge (add line 3 and line 4)			5	\$

- Attach check or money order for the amount on line 5 payable to "New York State Sales Tax."
- Include on the check or money order your sales tax ID number, this form number and the period you are reporting.
- Mail your return in the enclosed envelope to applicable P.O. Box on or before **December 20, 1989**.

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?

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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 $b \times (c + d)$ (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 (county) - except	7				1706
Gloversville (city)	7				1715
Johnstown (city)	7				1724
Genesee - except	7				1892
Batavia (city)	7				1822
Greene	7				1912
Hamilton	7				2002
Herkimer	7				2100
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	8				2803
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	6¼				3324
Orleans	7				3472

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PENALTY COMPUTATION

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

RETURN ADDRESSES

If you are NOT participating in the New Jersey/New York or Connecticut/New York 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 * ORANGE OTSEGO * PUTNAM * RENSSELAER * ROCKLAND SARATOGA	SCHENECTADY SCHOHARIE SCHUYLER STEUBEN * ST. LAWRENCE * SULLIVAN TIOGA TOMPKINS ULSTER WARREN WASHINGTON	P. O. Box 688 Albany, NY 12201-0688
NEW YORK COUNTY with ZIP CODES 10001-10019 RICHMOND			P. O. Box 2058 Church Street Station New York, NY 10008-2058
* BRONX KINGS NEW YORK COUNTY	QUEENS * WESTCHESTER with ZIP CODES 10020-10040		G. P. O. Box 5464 New York, NY 10087-5464
NASSAU	SUFFOLK		P. O. Box 1866 Hicksville, NY 11802-1866
CAYUGA CORTLAND LIVINGSTON MADISON	MONROE ONONDAGA ONTARIO ORLEANS	OSWEGO SENECA WAYNE YATES	P. O. Box 4777 Syracuse, NY 13221-4777
ALLEGANY CATTARAUGUS	CHAUTAUQUA ERIE	GENESEE NIAGARA WYOMING	All filers in these counties except Schedule FR filers (motor fuel and diesel motor fuel retailers): P. O. Box 194 Buffalo, NY 14240-0194 Schedule FR filers in these counties must mail this return to: P. O. Box 4777 Syracuse, NY 13221-4777
If you are participating in the New Jersey/New York or Connecticut/New York Reciprocal Tax Agreement, or both, attach the appropriate schedule(s) to your return			MAIL RETURN TO: P. O. Box 688 Albany, NY 12201-0688
If you are a vendor located out-of-state			MAIL RETURN TO: P. O. Box 688 Albany, NY 12201-0688

*** Effective December 1, 1989 businesses located in counties marked with an asterisk (*) must mail their returns, whether for the current or any prior period, to the new address indicated.**

IF YOU NEED HELP...

PHONE

For forms or publications

from within New York State, call toll free
from outside New York State, call

1 800 462-8100
518 438-1073

For information

from within New York State, call toll free
from outside New York State, call

1 800 CALL TAX (1 800 225-5829)
518 438-8581

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

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