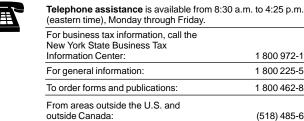
	New York State Department of Taxat	Part-Quarterly ST-809		
	New York State and Loc	al	October 2000	
	Sales and Use Tax Retur	rn	Tax period October 1, 2000 – October 31,	2000
	for Part-Quarterly Filers			
Sales tax identification			November 2000	
	· · · · · · · · · · · · · · · · · · ·		S M T W T F S 1 2 3 4	801
Legal name (if no label, print	t legal name as it appears on the Certificate of Authority)		5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	
dba (doing business as)	name Place address label	here	26 27 28 29 30 Due date:	
Number and street	alace address las		20 Monday, November 20), 2000
City, state, ZIP code	Place		You will be responsib penalty and interest in	
City, state, ZIP code			return is not postmar this date.	
No tax due? Check the b	box and enter your gross sales in Box 1 of Step 1 belo	ow; enter <i>none</i> in Boxes 2 and 3.		
You must fi	ile by the due date even if no tax is due. See 1 in ir	nstructions.		
Has your address or bu	isiness information changed? If so, enter new mailin	g address on preprinted label above. See	2 in instructions.	
Complete Step 1 or	Step 2, but not both. (See 6) in instruct	ions)		
Step 1 of 3 Long	method of calculating tax due			
			1	
1 Enter total gross sa	ales and services (to nearest dollar; see 3 in inst	ructions)		.00
0 Ententedationship			2	00
2 Enter total taxable	sales and services (to nearest dollar; see $oldsymbol{4}$ in ins	structions)		.00
3 Enter total purchas	es subject to use tax (to nearest dollar; see 5 in	instructions)		.00
4 Sales and use tax	(see 🕡 in instructions)	. 4		
5 Credit for prepaid s	ales tax (see 3) in instructions)	5		
6 Net tax due (subtrac	ct Box 5 amount from Box 4 amount)			
	ed (attachments required, see 🧕 in instructions)			
	(including PrompTax payments; see 🛈 in instructions)			
	to Box 8 amount			
	due (subtract Box 9 amount from Box 6 amount)			
11 Interest and penalty	y (see 🛈 in instructions)		12	
12 Amount due (add	Box 10 amount to Box 11 amount; see 🕑 in instru	ctions) Pay this am		
Step 2 of 3 Short	method of calculating tax due			
1 Comparable quarte	er of prior year (see 🚯 in instructions)*	. 1		
	1 amount)	. 2		
3 Credit for prepaid s	ales tax (see 🔞 in instructions)	. 3		
4 Net tax due (subtrac	ct Box 3 amount from Box 2 amount)			
	s required, see 🚯 in instructions)			//////
	(including PrompTax payments, see 🚯 in instructions)			///////
	to Box 6 amount			
	due (subtract Box 7 amount from Box 4 amount)			
9 Interest and penalty	y (see 🕡 in instructions)		<u>9</u> 10	
10 Amount due (add	Box 8 amount to Box 9 amount; see 🔞 in instructi	ons) Pay this am		
*Include short method a	adjustment in Box 1 (see Short method adjustn	For office use only		
Locality	Adjustment\$			
	Ψ			

Step 3 of 3 Sign and r Make sure you keep a complete			Must be postmarked by Monday, November 20, 2000, to be considered filed on time. See flowchart below for complete mailing information.				
Printed name of taxpayer			Title				
Signature of taxpayer		Date	Daytime telephone ()			
Printed name of preparer, if other than taxpayer							
Preparer's address							
Signature of preparer, if other tha	n taxpayer		Daytime telephone (
Where to mail your return and	Do you participate in the N Connecticut/New York Rec	ew Jersey/New York or the iprocal Tax Agreement?	David Sample 100 Elm Street Albany, NY 12203	2971 DATE November 20, 2000			
attachments If using a private delivery service rather than the U.S.	No	Yes	PAY TO THE ORDER OF New York State Sales 1 One Thousand and 00/100	ax \$1000 Dollars			
Postal Service, see (19) in instructions for the correct address.	Address envelope to: NYS SALES TAX PROCESSING JAF BUILDING PO BOX 1208	Address envelope to: NYS SALES TAX PROCESSING RECIPROCAL TAX AGREEMENT JAF BUILDING	First State Bank	Maid Sample			
If you are enrolled in the PrompTax	NEW YORK NY 10116-1208	PO BOX 1209 NEW YORK NY 10116-1209	Don't forget to write your ID#, ST-809, and tax period	Don't forget to sign your check			

Need help?



Fax-on-demand forms: Forms are

available 24 hours a day, 7 days a week.



Internet access: http://www.tax.state.ny.us



Hotline for the hearing and speech impaired: 1 800 634-2110 from 8:30 a.m. to 4:25 p.m. (eastern time), Monday through Friday. If you do not own a telecommunications device for the deaf (TDD), check with independent living centers or community action programs to find out where machines are available for public use



1 800 972-1233

1 800 225-5829

1 800 462-8100

(518) 485-6800

1 800 748-3676

Persons with disabilities: In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call 1 800 225-5829.



If you need to write, address your letter to: NYS TAX DEPARTMENT TAXPAYER ASSISTANCE BUREAU W A HARRIMAN CAMPUS ALBANY NY 12227

Refer to instructions (Form ST-809-I) if you have questions or need help. Make sure you keep a completed copy of your return for your records.