

New York State and Local Sales and Use Tax Return Quarterly for Part-Quarterly Filers

June	July	August			
	Tax Period				
	001 – Augus				

Sales tax i	dentification number	1 1 1 1 1 1	September 2001			
Legal name	(if no label, print legal name as it appears on the Certificate of Authority)		2 3 4 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	2		
dba (doing b	ousiness as) name	.0	30			
Number and	d street Place label he	ie.		ue date: nursday,		
City, state, 2			You will be	eptember 20, 2001 e responsible for		
				nd interest if your not postmarked by		
No tax due?	Check the box to the right and complete Step 1; in Step 3 of You must file by the due date even if no tax is due. There i					
Multiple locations?	If you are reporting sales tax for more than one business to the right and attach a list of your locations.			ne box to		
Final return?	Check the box to the right if you are discontinuing your bu your <i>Certificate of Authority</i> . Attach the <i>Certificate of Authority</i> .					
Has your ad	dress or business information changed? If so, check the		<u></u>	in instructions.		
Step 1 of	9 Gross sales and services	Enter total gross sales and service in box 1		.00		
Do not incl	ude sales tax in the gross sales and services amo	ount. See 4 in instructions.				
Step 2 of	9 Identify required schedules	Check the box(es) on the right below proceed to Step 3. Need to obtain s				
Quarterly schedule	Description			Check the box for each schedule you are attaching		
SCHEDULE	Use Form ST-810.2, Quarterly Schedule A for Part-Quifood and drink (restaurant meals, takeout, etc.) and fro admissions, club dues, and cabaret charges in Niagara	om hotel occupancy in Nassau or N				
SCHEDULE	Use Form ST-810.3, Quarterly Schedule B for Part-Quarterly Filers, and delivery of gas and electricity, and residential energy sour report sales of nonresidential utility services made to QEZEs on Fo	ces and services, including school district	utility taxes. Reminder: You must			
SCHEDULE FR	Use Form ST-810.10, <i>Quarterly Schedule FR for Part-Quarterly Filers</i> , to report retail sales of motor fuel or diesel motor fuel , and fuel taken from inventory, as explained in the schedule's instructions.					
SCHEDULE	Use Form ST-810.7, Quarterly Schedule H for Part-Quarterly Filers, to report sales of clothing and footwear eligible for exemption from New York State and some local sales and use tax.					
SCHEDULE	Use Form ST-810.5, Quarterly Schedule N for Part-Quarterly Filers, to report taxes due and sales of certain services in New York City. Reminder: Providers of parking services must also file Form ST-810.5-ATT, Quarterly Schedule N-ATT for Part-Quarterly Filers.					
SCHEDULE	Use Form ST-810.6, <i>Quarterly Schedule P for Part-Qu</i> PrompTax payments of sales tax.	uarterly Filers, only if you are a vend	dor registered to make			
SCHEDULE	Use Form ST-810.9, Quarterly Schedule Q for Part-Quor services to Qualified Empire Zone Enterprises (some local sales and use tax.					
SCHEDULE	Use Form ST-810.8, Quarterly Schedule T for Part-Quarter answering services, and telegraph services imposed by report sales of these services made to QEZEs on Form ST	y certain counties, school districts, an	d cities. Reminder: You must			
	Schedules CT and NJ: For reciprocal tax agreement	ent filing requirements, see 🕤 i	n instructions.			

Refer to instructions (Form ST-810-I) if you have questions or need help. Please be sure to keep a completed copy of your return for your records. See the bottom of page 4 for informational telephone numbers.

For office use only

6

Column subtotals (also enter on page 3, boxes 10, 11, and 12):

7

.00

.00

0602 Quarterly ST-810	Column B		Column C	Column		Column E	Column E	3 of
Taxing jurisdiction	Jurisdiction code		Taxable sales and services	Purchases s to tax		× Tax rate		
Otsego County	OT 3603		.00		.00	7%	(C + D) x E	
Putnam County	PU 3714		.00		.00	1		
Rensselaer County	RE 3875		.00		.00	1		
Rockland County	RO 3904		.00		.00.	1		
St. Lawrence County	ST 4087		.00		.00	1	-	
<u> </u>	SA 4103				.00.	-	 	
Sahara atali County	SC 4233		.00			1		
Schenectady County	SC 4233		.00		.00	1		
Schoharie County	SC 4303		.00		.00	1		
Schuyler County	SE 4512		.00		.00			
Seneca County			.00		.00			
Steuben County (outside the following)	ST 4688		.00		.00			
Hornell (city)	HO 4630		.00		.00			
Corning (city)	CO 4616		.00		.00			
Suffolk County	SU 4766		.00		.00			
Sullivan County	SU 4812		.00		.00		 	\perp
Tioga County	TI 4903	-	.00		.00			_
Tompkins County (outside the following)	TO 5096	-	.00		.00		 	\perp
Ithaca (city)	IT 5013		.00		.00			\perp
Ulster County	UL 5113		.00		.00		<u> </u>	\perp
Warren County (outside the following)	WA 5292		.00		.00		<u> </u>	\perp
Glens Falls (city)	GL 5212		.00		.00			
Washington County	WA 5302		.00		.00			
Wayne County	WA 5402		.00		.00			
Westchester County (outside the following)	WE 5503		.00		.00			
Mount Vernon (city)	MO 5513		.00		.00			
New Rochelle (city)	NE 6855		.00		.00			
White Plains (city)	WH 5555		.00		.00			
Yonkers (city)	YO 6578		.00		.00			
Wyoming County	WY 5605		.00		.00	8%		
Yates County	YA 5702		.00		.00	7%		
Taxes in New York City [includes counties of Bronx, Kings								
(Brooklyn), New York (Manhattan), Queens, and Richmond (Staten Island)]								
New York City/State combined tax	NE 8009		.00		.00			
New York State/MCTD (fuel and utilities)	NE 8040		.00		.00	41/4%		
New York City — local tax only (enter box 9 amount in Step 7B)	NE 8010	9	.00		.00	4%		
	142 0010	9a	.00		.00	170		
New York City — local tax only (transportation and delivery of gas and electric services; enter box 9a		<u> </u>						
amount in Step 7B)	NE 8012		.00		.00	3%		
	INE OUTZ		.00		.00	3 /0		
		10		11			12	
Column subtotals from page 2, boxes 6, 7, and 8:		H	.00	<u></u>	.00		1-1	
		13		14		-	15	
Colu	mn totals:	\vdash	.00		.00		1.0	
						(//////////////////////////////////////	1	
Credit summary — Enter the total amount of credits claim	ied in Step	3 abo	ve, and on any attac		•		<u> </u>	.00
Step 4 of 9 Calculate special taxes			Internal code	Column Taxable re	G ceipts	' Column H X Tax rate :	Column J Special taxes due (G × H)	
Passenger car rentals			PA 0003		.00	5%		
Information & entertainment services furnished via telephony and te	elegraphy		IN 7009		.00	5%		
				Total	specia	I taxes:	16	
Step 5 of 9 Calculate tax credits and advance pa	vments						Column K	
Credit for prepaid sales tax on cigarettes						rnal code	Credit amount	
· · · · · · · · · · · · · · · · · · ·					//////	R C8888		
Credits against sales or use tax (see to in instructions)					-{////		<u></u>	+
Advance payments (including ST-809 and PrompTax payments)				V/////	///////////////////////////////////////	/		
	ayments)				/////	//////////////////////////////////////		
Advance payments (including \$1-809 and PrompTax page Unclaimed vendor collection credit (attach Form PR-912)	дуппенто)				UI	N 7802	17	

Page 4 of 4 ST-810 (8/01)			06	Quarterly ST-810
Step 6 of 9 Calculate to	axes due		nn total (box 15) to <i>Total special taxes</i> ax credits and advance payments	Taxes due
Box 15 amount \$	Box 16 amount \$	Box — amo	17 unt \$	_ = 18
Step 7 of 9 Calculate vo	endor collection credit	You are eligible for vendor co September 20, 2001, and you If you are not eligible, enter	Ilection credit ONLY if you file by pay the full amount due with the retur "0" in box 19 and go to 7D .	rn.
TA If you are not required start at the asterisk (*) Schedule B, Part 4, box Schedule B, Part 4, box Schedule B-ATT Schedule H Schedule N Schedule Q Schedule T-ATT Total adjustment TC Eligible sales amount from 78 Schedule B, Part 4, box 6 from \$ CR Pay penalty and in	in 7B. 4	\$s and b) \$bunt calculated, but not more the	Credit rate X 3½% = \$	_
	access our Web site at www.tax.sta	at amount in box 20.	otal penalty and interest calculated payable to New York State Sales Tax	20 T
Final calculation:	Taking vendor collecti	Write on your check your ID on credit? Subtract box terest? Add box 20 to bo	19 from box 18.	Total amount due
Step 9 of 9 Sign and ma			hursday, September 20, 2001, to complete mailing information.	
Printed name of taxpayer			Title	
Printed name of preparer, if other	than taxpayer)
	ın taxpayer		,) ew York State Sales Tax.
Where to mail your return and	Do you participate in the New Connecticut/New York Recipr		David Sample 100 Elm Street Albany, NY 12203	2971 DATE September 10, 2001
attachments If using a private delivery service rather than the U.S. Postal Service, see 2 in instructions for the correct address.	Address envelope to: NYS SALES TAX PROCESSING JAF BUILDING PO BOX 1208 NEW YORK NY 10116-1208 NEW YORK NY 10116-1208	ddress envelope to: YS SALES TAX PROCESSING ECIPROCAL TAX AGREEMENT AF BUILDING O BOX 1209 EW YORK NY 10116-1209	PAY TO THE PAY FOR State Sales I One Thousand and 00/100 First State Bank 00-00000000 ST-810 8/31/01 Don't forget to write your ID#, ST-810, and 8/31/01.	DoLLARS Janua Sample Jon't forget to sign your check
Need help?	eu in the Prompiax pro		rnet access: www.tax.state.ny.us	
Telephone assistance is av (eastern time), Monday thro	railable from 8:30 a.m. to 4:25 p. ugh Friday.	m 🚍	sons with disabilities: In compliately lighted that our state of the same state of t	

Business Tax information: 1 800 972-1233
Forms and publications: 1 800 462-8100
From outside the U.S. and outside Canada: (518) 485-6800

Fax-on-demand forms: 1 800 748-3676

Hearing and speech impaired (telecommunications device for the deaf (TDD) callers only): 1 800 634-2110 (8:30 a.m. to 4:25 p.m., eastern time)

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.